

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
JUSTICE-PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		16130.21
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	17357.53									
(c) Total Receipts (from Line 19)	0.00	7690.41								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	17357.53	23820.62								
7. Total Disbursements (from Line 31)	10000.00	16463.09								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7357.53	7357.53								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	2000.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	55267.96									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
JUSTICE-PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A 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)	0.00	0.00
(ii) Unitemized	0.00	7690.41
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	7690.41
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	7690.41
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	7690.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	7690.41

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) 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.....	0.00	6463.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	6463.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	10000.00	10000.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10000.00	16463.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10000.00	16463.09

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)	0.00	7690.41
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	7690.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	6463.09
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	6463.09

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 6 / 15	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
JUSTICE-PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Committee for Conservative Political Action			Nature of Debt (Purpose): Debt Owed by Defunct Committee
Mailing Address 1001 Dove St			
City Newport Beach	State CA	ZIP Code 92660	

Outstanding Balance Beginning This Period		Transaction ID: SD9.4104	
2000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2000.00	

1) SUBTOTALS This Period This Page (optional).....	▶	2000.00
2) TOTALS This Period (last page this line number only).....	▶	2000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	2000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
JUSTICE-PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct	Nature of Debt (Purpose): Direct Mail Services
Mailing Address 1420 Spring Hill Rd	
City McLean State VA ZIP Code 22102	

Outstanding Balance Beginning This Period 568.57	Transaction ID: SD10.4106	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 568.57

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct	Nature of Debt (Purpose): Direct Mail Services
Mailing Address 1420 Spring Hill Rd	
City McLean State VA ZIP Code 22102	

Outstanding Balance Beginning This Period 14478.63	Transaction ID: SD10.4108	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14478.63

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct	Nature of Debt (Purpose): Direct Mail Services-accrued since 12/31/03
Mailing Address 1420 Spring Hill Rd	
City McLean State VA ZIP Code 22102	

Outstanding Balance Beginning This Period 1210.47	Transaction ID: SD10.4109	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1210.47

1) SUBTOTALS This Period This Page (optional).....	16257.67
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
JUSTICE-PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct			Nature of Debt (Purpose): Postage & Direct Mail Services
Mailing Address 1420 Spring Hill Rd			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="884.83"/>		Transaction ID: SD10.4110	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="884.83"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct			Nature of Debt (Purpose): Direct Mail Services/Postage
Mailing Address 1420 Spring Hill Rd			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="14472.70"/>		Transaction ID: SD10.4111	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="14472.70"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct			Nature of Debt (Purpose): Direct Mail-accrued since 12/31/08
Mailing Address 1420 Spring Hill Rd			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="5772.56"/>		Transaction ID: SD10.4112	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5772.56"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="21130.09"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
JUSTICE-PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct			Nature of Debt (Purpose): Mailing Services
Mailing Address 1420 Spring Hill Rd			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="1494.80"/>		Transaction ID: SD10.4113	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1494.80"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ECG Data Center			Nature of Debt (Purpose): Data Processing
Mailing Address 1420 Spring Hill Rd			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="4062.40"/>		Transaction ID: SD10.4114	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4062.40"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ECG Data Center			Nature of Debt (Purpose): Data Processing
Mailing Address 1420 Spring Hill Rd			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="9800.55"/>		Transaction ID: SD10.4116	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9800.55"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="15357.75"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 / 15	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
JUSTICE-PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ECG Data Center			Nature of Debt (Purpose): Data Processing accrued since 12/31/03
Mailing Address 1420 Spring Hill Rd			
City McLean	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period		Transaction ID: SD10.4117	
2522.45			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2522.45	

1) SUBTOTALS This Period This Page (optional).....	2522.45
2) TOTALS This Period (last page this line number only).....	55267.96
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	55267.96

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) JUSTICE-PAC	FEC IDENTIFICATION NUMBER C C00159319
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Ely Radio LLC

Mailing Address
335 W 4th St

City Winnemucca	State NV	Zip Code 89445
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Purpose of Expenditure Radio Time	Category/ Type 004
--------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought	2000.00
---------------------------------------------------------	---------

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

Amount
2000.00

Transaction ID: SE.4161

Office Sought: House State: NV
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Ely Radio LLC

Mailing Address
335 W 4th St

City Winnemucca	State NV	Zip Code 89445
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Purpose of Expenditure Radio Ad Time	Category/ Type 004
-----------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought	6000.00
---------------------------------------------------------	---------

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

Amount
2000.00

Transaction ID: SE.4176

Office Sought: House State: NV
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	4000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr Randy Goodwin
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) JUSTICE-PAC	FEC IDENTIFICATION NUMBER C C00159319
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Landslide Communications

Mailing Address
3838 Rayment Dr., Ste 3

City Las Vegas	State NV	Zip Code 89121
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Purpose of Expenditure Telephone Calls	Category/ Type 004
-------------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
DAVID JEFFREY HARMER

Calendar Year-To-Date Per Election for Office Sought	1000.00
---------------------------------------------------------	---------

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

Amount
1000.00

Transaction ID: SE.4152

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Landslide Communications

Mailing Address
3838 Rayment Dr., Ste 3

City Las Vegas	State NV	Zip Code 89121
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Purpose of Expenditure Telephone Calls	Category/ Type 004
-------------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
VAN TRAN

Calendar Year-To-Date Per Election for Office Sought	1000.00
---------------------------------------------------------	---------

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

Amount
1000.00

Transaction ID: SE.4155

Office Sought: House State: CA
 Senate District: 47
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr Randy Goodwin
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) JUSTICE-PAC	FEC IDENTIFICATION NUMBER C C00159319
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Landslide Communications

Mailing Address
3838 Rayment Dr., Ste 3

City Las Vegas	State NV	Zip Code 89121
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Purpose of Expenditure Telephone Calls	Category/ Type 004
-------------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
ALLEN B WEST

Calendar Year-To-Date Per Election for Office Sought	1000.00
---------------------------------------------------------	---------

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

Amount
1000.00

Transaction ID: SE.4157

Office Sought: House State: FL
 Senate District: 22
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Landslide Communications

Mailing Address
3838 Rayment Dr., Ste 3

City Las Vegas	State NV	Zip Code 89121
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Purpose of Expenditure Telephone Calls	Category/ Type 004
-------------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SEAN D BIELAT

Calendar Year-To-Date Per Election for Office Sought	1000.00
---------------------------------------------------------	---------

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

Amount
1000.00

Transaction ID: SE.4159

Office Sought: House State: MA
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr Randy Goodwin
Signature

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

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) JUSTICE-PAC	FEC IDENTIFICATION NUMBER C C00159319
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Landslide Communications

Mailing Address
3838 Rayment Dr., Ste 3

City Las Vegas	State NV	Zip Code 89121
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Purpose of Expenditure Telephone Calls	Category/ Type 004
-------------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SHARRON E ANGLE

Calendar Year-To-Date Per Election for Office Sought	4000.00
---------------------------------------------------------	---------

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

Amount
2000.00

Transaction ID: SE.4165

Office Sought: House State: NV
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Landslide Communications

Mailing Address
3838 Rayment Dr., Ste 3

City Las Vegas	State NV	Zip Code 89121
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Purpose of Expenditure Void Check	Category/ Type 004
--------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
SEAN D BIELAT

Calendar Year-To-Date Per Election for Office Sought	1000.00
---------------------------------------------------------	---------

Date
M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Amount
-1000.00

Transaction ID: SE.4182

Office Sought: House State: MA
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	10000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr Randy Goodwin
Signature

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

B. Form/Schedule : **SE**
Transaction ID : **SE.4182**

Contracted services were never performed. This independent expenditure did not take place as reported. Check returned uncashed.