

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Defenders of Freedom and Security

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"/> | <input type="text" value="1000.00"/> | <input type="text" value="1000.00"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="1000.00"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="55819.95"/> | <input type="text" value="55819.95"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="56819.95"/> | <input type="text" value="56819.95"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="25624.37"/> | <input type="text" value="25624.37"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="31195.58"/> | <input type="text" value="31195.58"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="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

Write or Type Committee Name

Defenders of Freedom and Security

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)..... | 14554.00 | 14554.00 |
| (ii) Unitemized | 41265.95 | 41265.95 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 55819.95 | 55819.95 |
| (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) | 55819.95 | 55819.95 |
| 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 Transfers (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))..... ▶ | 55819.95 | 55819.95 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 55819.95 | 55819.95 |

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 | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 15024.37 | 15024.37 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 15024.37 | 15024.37 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 4100.00 | 4100.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 1000.00 | 1000.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 5500.00 | 5500.00 |
| (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))..... | 5500.00 | 5500.00 |
| 29. Other Disbursements | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated 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)) .. | 25624.37 | 25624.37 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 25624.37 | 25624.37 |

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) | 55819.95 | 55819.95 |
| 34. Total Contribution Refunds (from Line 28(d)) | 5500.00 | 5500.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 50319.95 | 50319.95 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 15024.37 | 15024.37 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 15024.37 | 15024.37 |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 6 OF 32 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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)
Defenders of Freedom and Security

A. Karl Anttila
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 11298

City Bakersfield State CA Zip Code 93389

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2013
Transaction ID : SA11AI.4953

Amount of Each Receipt this Period
 100.00

B. Karl Anttila
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 11298

City Bakersfield State CA Zip Code 93389

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2013
Transaction ID : SA11AI.5569

Amount of Each Receipt this Period
 100.00

C. Karl Anttila
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 11298

City Bakersfield State CA Zip Code 93389

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2013
Transaction ID : SA11AI.6261

Amount of Each Receipt this Period
 100.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)
A. Jo Ann Baughman

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2013
Transaction ID : SA11AI.5395

Amount of Each Receipt this Period
59.00

Full Name (Last, First, Middle Initial)
B. Jo Ann Baughman

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
282.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2013
Transaction ID : SA11AI.5510

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
C. Jo Ann Baughman

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
344.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2013
Transaction ID : SA11AI.5952

Amount of Each Receipt this Period
62.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 176.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. Jo Ann Baughman
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1269
 City Philomath State OR Zip Code 97370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 392.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2013
Transaction ID : SA11AI.6062
 Amount of Each Receipt this Period
 48.00

B. samuel borofsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 435 bryant ave
 City roslyn harbor State NY Zip Code 11576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2013
Transaction ID : SA11AI.4314
 Amount of Each Receipt this Period
 250.00

C. Kenneth Dalton
 Full Name (Last, First, Middle Initial)
 Mailing Address 332 S. Huntington Ave.
 City San Dimas State CA Zip Code 91773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2013
Transaction ID : SA11AI.5190
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 398.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 9 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)
A. edward dobson

Mailing Address 4105 gold bird ct

City north las vegas State NV Zip Code 89032

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2013
Transaction ID : SA11AI.4221

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Christine Dodds

Mailing Address 31 Whitcomb Drive

City Grosse Pointe Farms State MI Zip Code 48236-3034

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2013
Transaction ID : SA11AI.5093

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. James Edwards

Mailing Address 801 South Garner Street

City State College State PA Zip Code 16801

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2013
Transaction ID : SA11AI.6259

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5350.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 10 OF 32 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)
A. martin fenton

Mailing Address 500 stevens ave

City solana beach State CA Zip Code 92075

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 25 / 2013

Transaction ID : SA11AI.5316

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. James Flynn

Mailing Address 1016 SW Myrtle Dr.

City Portland State OR Zip Code 97201

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2013

Transaction ID : SA11AI.4858

Amount of Each Receipt this Period
250.00

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

Mailing Address 5300 South Los Altos Parkway
206

City Sparks State NV Zip Code 89436

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2013

Transaction ID : SA11AI.5537

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **850.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)
A. Clive Goodwin

Mailing Address 22 Fairmont St

City State Zip Code
Arlington MA 02474-0000

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2013
Transaction ID : SA11AI.6113

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Charles Haag

Mailing Address 14387 Denne

City State Zip Code
Livonia MI 48154

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2013
Transaction ID : SA11AI.6426

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. anne harrill

Mailing Address 1227 Woods Haven Rd.

City State Zip Code
Evergreen CO 80439

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2013
Transaction ID : SA11AI.5276

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. anne harrill
 Full Name (Last, First, Middle Initial)
 Mailing Address 1227 Woods Haven Rd.
 City Evergreen State CO Zip Code 80439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2013
Transaction ID : SA11AI.5357
 Amount of Each Receipt this Period
 75.00

B. Mary Alice Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1506
 City Mukilteo State WA Zip Code 98275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2013
Transaction ID : SA11AI.5931
 Amount of Each Receipt this Period
 250.00

C. Erich Kern
 Full Name (Last, First, Middle Initial)
 Mailing Address 24774 Shoshonee Dr.
 City Murrieta State CA Zip Code 92562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2013
Transaction ID : SA11AI.5252
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 13 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)
A. Erich Kern

Mailing Address 24774 Shoshonee Dr.

City State Zip Code
Murrieta CA 92562

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2013
Transaction ID : SA11AI.5729

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. John Kidd

Mailing Address 118 Main St

City State Zip Code
Topsfield MA 01983-0000

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2013
Transaction ID : SA11AI.5375

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. John Kidd

Mailing Address 118 Main St

City State Zip Code
Topsfield MA 01983-0000

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2013
Transaction ID : SA11AI.5562

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)
A. John Kidd

Mailing Address 118 Main St

City State Zip Code
Topsfield MA 01983-0000

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2013
Transaction ID : SA11AI.6327

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Dan Lagueux

Mailing Address 111 S. Alpine St
1

City State Zip Code
Oakland ME 04963-0000

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2013
Transaction ID : SA11AI.6279

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Eva Layton

Mailing Address 809 Bunker Hill Drive

City State Zip Code
Carson City NV 89703

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2013
Transaction ID : SA11AI.6430

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)
A. Herbert N. Morgan

Mailing Address 1201 N. Nash St.
604

City State Zip Code
Arlington VA 22209

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2013
Transaction ID : SA11AI.4534

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Avner Pecker

Mailing Address 3154 ash little river road NW

City State Zip Code
Ash NC 28420

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2013
Transaction ID : SA11AI.5146

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Daniel Slusser

Mailing Address 93 La Patera Dr.

City State Zip Code
Camarillo CA 93010

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2013
Transaction ID : SA11AI.4436

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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 16 OF 32 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)
A. Adam Stern

Mailing Address 2423 C Street #11

| | | |
|--------------------|-------------|-------------------|
| City Sacramento | State CA | Zip Code 95816 |
|--------------------|-------------|-------------------|

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

| | |
|-----------------------------------|--------------------------|
| Name of Employer Self-employed | Occupation film maker |
|-----------------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-495.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 01 | / | 2013 |

Transaction ID : SA11AI.5028

Amount of Each Receipt this Period
5.00

Full Name (Last, First, Middle Initial)
B. jocelyn stoller

Mailing Address 5201 north hacienda del sol

| | | |
|----------------|-------------|-------------------|
| City tucson | State AZ | Zip Code 85718 |
|----------------|-------------|-------------------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 05 | / | 2013 |

Transaction ID : SA11AI.5487

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. jocelyn stoller

Mailing Address 5201 north hacienda del sol

| | | |
|----------------|-------------|-------------------|
| City tucson | State AZ | Zip Code 85718 |
|----------------|-------------|-------------------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 09 | / | 2013 |

Transaction ID : SA11AI.5665

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 205.00 |
| 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 17 OF 32 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Jocelyn Stoller | | Date of Receipt MM / DD / YYYY 06 / 16 / 2013 Transaction ID : SA11AI.6052 |
| Mailing Address 5201 north hacienda del sol | | Amount of Each Receipt this Period 100.00 |
| City tucson | State AZ | Zip Code 85718 |
| 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 ▼ 500.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Robert Tarone | | Date of Receipt MM / DD / YYYY 06 / 20 / 2013 Transaction ID : SA11AI.6195 |
| Mailing Address 14 Chantilly Ct | | Amount of Each Receipt this Period 250.00 |
| City Rockville | State MD | Zip Code 20850 |
| 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 ▼ 250.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Bill Wagner | | Date of Receipt MM / DD / YYYY 06 / 17 / 2013 Transaction ID : SA11AI.6080 |
| Mailing Address 2015 se columbia river drive #120 | | Amount of Each Receipt this Period 1000.00 |
| City Vancouver | State WA | Zip Code 98661 |
| 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 ▼ 1000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1350.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)
A. Thomas Wheeler

Mailing Address 736 kingstown Drive

City Naples State FL Zip Code 34102

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2013
Transaction ID : SA11AI.4773

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Herschel Williams

Mailing Address 9453 Jamaica Beach

City Galveston State TX Zip Code 77554

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2013
Transaction ID : SA11AI.5069

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Herschel Williams

Mailing Address 9453 Jamaica Beach

City Galveston State TX Zip Code 77554

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2013
Transaction ID : SA11AI.5968

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)
A. John Wilson

Mailing Address 537 NW 47th Street

City Oklahoma City State OK Zip Code 73118

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2013
Transaction ID : SA11AI.5045

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. LINDA YELLIN

Mailing Address 4 SHORELINE

City NEWPORT COAST State CA Zip Code 92657

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2013
Transaction ID : SA11AI.5812

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Oleg Zeetser

Mailing Address 1730 Camino Palmero
211

City Los Angeles State CA Zip Code 90046

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2013
Transaction ID : SA11AI.6348

Amount of Each Receipt this Period
250.00

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1450.00 |
| TOTAL This Period (last page this line number only).....▶ | 14554.00 |

**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)

Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. Active Campaign

Mailing Address 150 N Michigan Ave
Suite 1230

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Online marketing consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2013

Transaction ID : SB21B.4134

Amount of Each Disbursement this Period

325.00

Full Name (Last, First, Middle Initial)

B. Active Campaign

Mailing Address 150 N Michigan Ave
Suite 1230

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Online marketing consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2013

Transaction ID : SB21B.4143

Amount of Each Disbursement this Period

225.00

Full Name (Last, First, Middle Initial)

C. Active Campaign

Mailing Address 150 N Michigan Ave
Suite 1230

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Online marketing consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2013

Transaction ID : SB21B.4156

Amount of Each Disbursement this Period

225.00

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

775.00

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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. Active Campaign

Mailing Address 150 N Michigan Ave
Suite 1230

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Online marketing consulting

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2013

Transaction ID : SB21B.4168

Amount of Each Disbursement this Period

225.00

Full Name (Last, First, Middle Initial)

B. Active Campaign

Mailing Address 150 N Michigan Ave
Suite 1230

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Online marketing consulting

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2013

Transaction ID : SB21B.4194

Amount of Each Disbursement this Period

225.00

Full Name (Last, First, Middle Initial)

C. Amagi Strategies

Mailing Address 55 West 105th St

City New York State NY Zip Code 10025

Purpose of Disbursement
PAC management consulting

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2013

Transaction ID : SB21B.4190

Amount of Each Disbursement this Period

5000.00

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

5450.00

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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. Comcast

Mailing Address 1701 John F Kennedy Blvd

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Internet service

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4144

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Comcast

Mailing Address 1701 John F Kennedy Blvd

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Internet service

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4159

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Comcast

Mailing Address 1701 John F Kennedy Blvd

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Internet service

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4172

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)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. Comcast

Mailing Address 1701 John F Kennedy Blvd

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Internet service

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4200

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DB Capitol Strategies

Mailing Address 717 King Street
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal and compliance consulting

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4130

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. DB Capitol Strategies

Mailing Address 717 King Street
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal and compliance consulting

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4141

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)

Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. DB Capitol Strategies

Mailing Address 717 King Street
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal and compliance consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2013

Transaction ID : SB21B.4148

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. DB Capitol Strategies

Mailing Address 717 King Street
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal and compliance consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2013

Transaction ID : SB21B.4162

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. DB Capitol Strategies

Mailing Address 717 King Street
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal and compliance consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2013

Transaction ID : SB21B.4175

Amount of Each Disbursement this Period

500.00

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

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

1500.00

**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)

Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. DB Capitol Strategies, PLLC

Mailing Address 717 King Street
Ste 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Legal and compliance consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2013

Transaction ID : SB21B.4126

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. EI AI Air

Mailing Address 15 East 26th St

City New York State NY Zip Code 10010-0000

Purpose of Disbursement
Travel expenses

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2013

Transaction ID : SB21B.4167

Amount of Each Disbursement this Period

2191.97

Full Name (Last, First, Middle Initial)

C. Netboots

Mailing Address 9043 Soquel Dr

City Aptos State CA Zip Code 95003

Purpose of Disbursement
Online service fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2013

Transaction ID : SB21B.4140

Amount of Each Disbursement this Period

150.00

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

2841.97

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)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. Netboots

Mailing Address 9043 Soquel Dr

City Aptos State CA Zip Code 95003

Purpose of Disbursement
Online service fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2013

Transaction ID : SB21B.4149

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Netboots

Mailing Address 9043 Soquel Dr

City Aptos State CA Zip Code 95003

Purpose of Disbursement
Online service fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2013

Transaction ID : SB21B.4161

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

C. Netboots

Mailing Address 9043 Soquel Dr

City Aptos State CA Zip Code 95003

Purpose of Disbursement
Online service fee

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2013

Transaction ID : SB21B.4174

Amount of Each Disbursement this Period

150.00

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

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

450.00

**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)

Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. Travel Insured International

Mailing Address 52-S Oakland Avenue

City East Hartford State CT Zip Code 06108-4098

Purpose of Disbursement
Travel expenses

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2013

Transaction ID : SB21B.4193

Amount of Each Disbursement this Period

291.00

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address 140 West Street

City New York State NY Zip Code 10007

Purpose of Disbursement
Communication services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2013

Transaction ID : SB21B.4158

Amount of Each Disbursement this Period

258.81

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address 140 West Street

City New York State NY Zip Code 10007

Purpose of Disbursement
Telephone services

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2013

Transaction ID : SB21B.4145

Amount of Each Disbursement this Period

136.29

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

686.10

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)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address 140 West Street

City New York State NY Zip Code 10007

Purpose of Disbursement
Telephone services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4160

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address 140 West Street

City New York State NY Zip Code 10007

Purpose of Disbursement
Telephone services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4173

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address 140 West Street

City New York State NY Zip Code 10007

Purpose of Disbursement
Telephone services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4199

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 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)

Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. GABRIEL GOMEZ FOR SENATE

Mailing Address C/O RED CURVE SOLUTIONS
138 CONANT STREET

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
Political contribution

011

Candidate Name

GABRIEL GOMEZ FOR SENATE

Category/
Type

Office Sought: House
 Senate
 President
State: MA District: 00

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Special-General

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 22 / 2013

Transaction ID : SB23.4154

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. GABRIEL GOMEZ FOR SENATE

Mailing Address C/O RED CURVE SOLUTIONS
138 CONANT STREET

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
Political contribution

011

Candidate Name

GABRIEL GOMEZ FOR SENATE

Category/
Type

Office Sought: House
 Senate
 President
State: MA District: 00

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Special-General

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 14 / 2013

Transaction ID : SB23.4182

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

C.

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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

4100.00

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

4100.00

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

| | | | | | | |
|---|--------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | | PAGE 30 OF 32 | | |
| | <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input checked="" 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)
Defenders of Freedom and Security

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Adam Stern | | Date of Disbursement MM / DD / YYYY 04 / 22 / 2013 |
| Mailing Address 2423 C Street #11 | | Transaction ID : SB26.4124 Amount of Each Disbursement this Period <u>1000.00</u> |
| City Sacramento | State CA | |
| Zip Code 95816 | | |
| Purpose of Disbursement Loan repayment in full | | Category/ Type <u>009</u> |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement MM / DD / YYYY |
| Mailing Address | | Amount of Each Disbursement this Period <u> </u> |
| City | State | |
| Zip Code | | |
| Purpose of Disbursement | | Category/ Type <u> </u> |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

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

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | <u>1000.00</u> |
| TOTAL This Period (last page this line number only).....▶ | <u>1000.00</u> |

**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 checked="" 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)

Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. edward dobson

Mailing Address 4105 gold bird ct

City north las vegas State NV Zip Code 89032

Purpose of Disbursement
Contribution refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A.6464

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Adam Stern

Mailing Address 2423 C Street #11

City Sacramento State CA Zip Code 95816

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A.4155

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

/ /

Amount of Each Disbursement this Period

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

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Defenders of Freedom and Security** Transaction ID : SC/10.4109

| | |
|--|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Adam Stern | Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 2423 C Street #11 | |
| City Sacramento State CA ZIP Code 95816 | |

| | | |
|------------------------------------|---------------------------------------|---|
| Original Amount of Loan 1000.00 | Cumulative Payment To Date 1000.00 | Balance Outstanding at Close of This Period 0.00 |
|------------------------------------|---------------------------------------|---|

TERMS

| | | | |
|---------------------------------|------------------------|-------------------------------|---|
| Date Incurred 12 / 28 / 2012 | Date Due 12/31/2013 | Interest Rate 0.00 % (apr) | Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------------------------|------------------------|-------------------------------|---|

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

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|---|----------|
| SUBTOTALS This Period This Page (optional).....▶ | [] 0.00 |
| TOTALS This Period (last page in this line only).....▶ | [] 0.00 |

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