Image# 14952386677 PAGE 1 / 12

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An A	Authorizea Comm	ittee		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If ty over the lines		12FE4M5	
ARAB AMERICAN LEA	ADERSHIP COUN	CIL PAC			
ADDRESS (number and street)	1600 K STREET NW SL	JITE 601			
Check if different					
than previously reported. (ACC)	WASHINGTON			DC	20006
2. FEC IDENTIFICATION NU	MBER ▼	CITY A		STATE A	ZIP CODE ▲
C C00194225	3.	IS THIS REPORT X	NEW (N) OR	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:	Feb 20 (M2)	May 20 (M5)	H	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)	H	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q		Apr 20 (M4)	Jul 20 (M7)	Oct 2	20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q	PRE-Election	Primary (1	
October 15 Quarterly Report (Q	Report for the	e: Conventio	n (12C)	Special (1	(2S)
January 31 Year-End Report (Y	FI	ection on 11	04	2014	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the	· ·	30G)	Runoff (36	OR) Special (30S)
Termination Report (TER)	Ele	ection on	/ D = D /	Y I Y I Y I Y	in the State of
5. Covering Period 10	01 201	through	n 10	15/	2014
I certify that I have examined thi	s Report and to the bes	t of my knowledge an	d belief it is tru	e, correct and	complete.
Type or Print Name of Treasurer	Dr. James Zogby				
Signature of Treasurer Dr. Ja	umes Zogby	[Electronic	ally Filed]	ate 10	/ 23 / Y Y Y Y Y 2014
NOTE: Submission of false, errone	eous, or incomplete informa	ation may subject the p	person signing th	is Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

ARAB AMERICAN LEADERSHIP COUNCIL PAC

10 01 2014 10 2014 Report Covering the Period: 15 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2656.29 January 1, 2014 (b) Cash on Hand at 1221.32 Beginning of Reporting Period..... 251.00 0.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1221.32 2907.29 6(a) and 6(c) for Column B)..... 65.15 1751.12 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 1156.17 1156.17 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 6930.77 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ARAB AMERICAN LEADERSHIP COUNCIL PAC

I. Receipts		LUMN A	COLUMN B	
<u> </u>	Total	This Period	Calendar Year-to-Da	ate
Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees		0.00		0.00
(i) Itemized (use Schedule A)		0.00		
(ii) Unitemized(iii) TOTAL (add		0.00	7	200.00
Lines 11(a)(i) and (ii)		0.00	7	200.00
(b) Political Party Committees		0.00		0.00
(c) Other Political Committees				-
(such as PACs)		0.00	1	0.00
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry				
Totals to Line 33, page 5)		0.00		200.00
Transfers From Affiliated/Other	7	7	7	
Party Committees		0.00		0.00
Tarty Committees		, , , ,		
All Loans Received		0.00		10.00
7th Edulo Flodolvou	7	7		
		0.00		0.00
Loan Repayments Received		0.00		0.00
Offsets To Operating Expenditures				
(Refunds, Rebates, etc.)		0.00		0.00
(Carry Totals to Line 37, page 5)		0.00		0.00
Refunds of Contributions Made				
to Federal Candidates and Other				0.00
Political Committees		0.00		0.00
Other Federal Receipts				
(Dividends, Interest, etc.)		0.00		41.00
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	1	0.00
(c) Total Transfers (add 18(a) and 18(b))		0.00		0.00
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶		0.00		251.00
			7 7	
Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶		0.00		251.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period	
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date
(i) Federal Share	32.59	500.67
(ii) Non-Federal Share	32.56	500.45
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))	65.15	1001.12
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	750.00
. Independent Expenditures	0.00	0.00
(use Schedule E)		7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(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
Other Disbursements	0.00	0.00
. 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
T. J. B. J		
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	65.15	1751.12
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	32.59	1250.67
from Line 31)	32.09	1230.07

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	200.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	200.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	32.59	500.67
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	32.59	500.67

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 6 OF 12
FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full)		Transaction ID : SC/10.4333	
RAB AMERICAN LEADERS	SHIP COLINCIL PAC		
INAD AMENICAN LEADERS	JIIII COUNCIL PAC	,	
LOAN SOURCE Full Name (Last, F	irst, Middle Initial)	Election:	
Arab American Institute		Primary	
		General	
Mailing Address 1600 K St, NW		Other (specify) ▼	
Suite 601			
City Washington		P Code 20006	
Original Amount of Loan	Cumulative Paymer	nt To Date Balance Outstanding at Close of Thi	s Perio
1000.	00	0.00	.00
TERMS			
Date Incurred	Date		
05 31 2013	Y	12/31/2013 0.00 % (apr) Yes	X No
List All Endorsers or Guarantors (i	any) to Loan Source		
1. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
		Amount	_
City	State ZIP Code	Guaranteed	
•		Outstanding:	-
2. Full Name (Last, First, Middle Init	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed	
		Outstanding:	-
3. Full Name (Last, First, Middle Init	al)	Name of Employer	
Mailing Address		Occupation	
		Amazint	
City	State ZIP Code	Amount Guaranteed	1
-··· ,	2 0000	Outstanding:	_
4. Full Name (Last, First, Middle Init	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	_
City	State ZIP Code	Guaranteed	
		Outstanding:	
UBTOTALS This Period This Page (o	ptional)		.00
OTALS This Period (last page in this	line only)		
arry outstanding balance only to LIN	E 3, Schedule D, for this lin	e. If no Schedule D, carry forward to appropriate line of Sur	nmary

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 7 OF 12

FOR LINE 13 OF FORM 3X

	Detailed Summary Page
AME OF COMMITTEE (In Full)	Transaction ID : SC/10.4422
ARAB AMERICAN LEADERSHIP COUNCI	L PAC
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
Arab American Institute	Primary
	General
Mailing Address 1600 K St NW	Other (specify)
Mailing Address 1600 K St, NW Suite 601	
City Washington State DC	ZIP Code 20006
	e Payment To Date Balance Outstanding at Close of This Period
Official Amount of Loan Cumulative	Data for Outstanding at Olose of This Period
10.00	0.00
TERMS	
Date Incurred	Date Due Interest Rate Secured:
03 31 2014	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Sou	urce
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	e Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Amount e Guaranteed
State ZIF COUL	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	
	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
Mailing Addiess	Occupation
	Amount
City State ZIP Code	Amount e Guaranteed
State ZIP Code	Outstanding:
UBTOTALS This Period This Page (optional)	10.00
OTALS This Period (last page in this line only)	1010.00
arry outstanding balance only to LINE 3, Schedule D, fo	r this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 8 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

12

NAME OF COMMITTEE (In Full)

,		,		
ARAB AMERICAN		- ^ D E D O L II D		
ARAR AMERICAN	.I I F	- 4116 8 8 116	(()	$P\Delta U$
	N ∟∟		COUNCIL	-1

A. Full Name (Last, First, Middle Initial) of Debte Arab American Institute	Nature of Debt (Purpose): Use Of Equipment and Supplies	
Mailing Address 1600 K St, NW Suite 601		
City State	Zip Code	
Washington	DC ₂₀₀₀₆	
Outstanding Balance Beginning This Period		Transaction ID : SD10.4136
5869.77		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	5869.77
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of Debt (Purpose):
Arab American Institute		Testing Merchant Terminal
Mailing Address 1600 K St, NW Suite 601		
City State	Zip Code	
Washington	DC 20006	
Outstanding Balance Beginning This Period		Transaction ID : SD10.4421
10.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	10.00
C. Full Name (Last, First, Middle Initial) of Debt First Last	or or Creditor	Nature of Debt (Purpose): Fraudulent Transactions
Mailing Address 56 Testville Dr.	Mailing Address 56 Testville Dr.	
City	State Zip Code	
Testville	MS 39401	
Outstanding Balance Beginning This Period 20.00		Transaction ID: SD10.4459
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	20.00
1) SUBTOTALS This Period This Page (optional)	>	5899.77
2) TOTALS This Period (last page this line numbe	r only)	
3) TOTAL OUTSTANDING LOANS from Schedule		
4) ADD 2) and 3) and carry forward to appropriate		
	, 3 × 1 3 × 7/×	

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

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

PAGE OF FOR LINE NUMBER: (check only one)

	9
X	10

12

NAME OF COMMITTEE (In Full) ARAB AMERICAN LEADERSHIP COUNCIL PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Fraudulent Transaction First Last Mailing Address 56 Testville Dr. State Zip Code MS Testville 39401 Transaction ID: SD10.4460 Outstanding Balance Beginning This Period 5.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 5.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Fraudulent Transaction First Last Mailing Address 56 Testville Dr. City State Zip Code Testville MS 39401 Outstanding Balance Beginning This Period Transaction ID: SD10.4461 5.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 5.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Fraudulent Transaction First Last Mailing Address 56 Testville Dr. Zip Code City State Testville 39401 MS Transaction ID: SD10.4462 Outstanding Balance Beginning This Period 10.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 10.00 0.00 20.00 1) SUBTOTALS This Period This Page (optional)..... 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) PAGE 10 OF
FOR LINE NUMBER:

(check only one) 9

12

NAME OF C	OMMITTEE (In Full) MERICAN LEADERSHIP CO	OUNCIL PA	C	
Firs	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor First Last			Nature of Debt (Purpose): Fraudulent Transaction
Mailing A	Mailing Address 56 Testville Dr.			
City Testville	State	Zip Code MS	39401	
Outsta	nding Balance Beginning This Period			Transaction ID : SD10.4463
	Amount Incurred This Period 0.00	Paym	ent This Period	Outstanding Balance at Close of This Period
	0.00		0.00	1.00
B. Full N	ame (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Mailing A	ddress			
City	State	Zip Code		
Outsta	nding Balance Beginning This Period Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period
C. Full N	Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of Debt (Purpose):
Mailing A	Mailing Address			
City		State	Zip Code	
Outsta	nding Balance Beginning This Period			
	Amount Incurred This Period	Paym	ent This Period	Outstanding Balance at Close of This Period
1) SUBTO	TALS This Period This Page (optional)			1.00
2) TOTALS	This Period (last page this line number	only)		5920.77
3) TOTAL) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			1010.00
4) ADD 2)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			▶ 6930.77

Image# 14952386687 11 OF 12

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full) ARAB AMERICAN LEADERSHIP COUNCIL PAC
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
——— Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
——— Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees
Flat Minimum Federal Percentage
If the committee will allocate using the flat minimum percentage of 50% federal funds, check $\overline{ extbf{X}}$ or
If the committee is spending more than 50% federal funds, indicate ratio below
Federal%
Nonfederal%
This ratio applies to (check all that apply):
Administrative X Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	12	OF	12	
FOR L	INE 2	21a OF	FORM	ЗХ

NAME OF COMMITTEE (In Full)

Á.	RAB AMERICAN LEADERSHI Full Name (Last, First, Middle Initial)		n ID : H4.4467		Allocated Activity or Event:
Α.	NPC	Transactio			Administrative Fundraising Exempt
	Mailing Address 5100 Interchange Way				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Louisville Purpose of Disbursement:	KY	40229		- Allocated Activity or Event Year-To-Date
	Merchant Fees			001	965.92
	Activity or Event Identifier: Administrative			Category/ Type	Date 10 03 2014
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	14.98		7 7	14.97	29.95
В.	Full Name (Last, First, Middle Initial) Transaction ID : H4.4468				Allocated Activity or Event:
	American Express				Administrative Fundraising Exempt
	Mailing Address PO Box 53852				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Pheonix	AZ	85072		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: Merchant Fees			001	973.87
	Activity or Event Identifier: Administrative			Category/ Type	Date 10 03 2014
	FEDERAL SHARE	SHARE + NONFEDERAL		SHARE	= TOTAL AMOUNT
			NON EBENNE	OTIVATE	1017127111100111
	3.98		7	3.97	7.95
<u></u>	3.98 Full Name (Last, First, Middle Initial)	Transactio	n ID : H4.4469		7.95 Allocated Activity or Event:
C.	Full Name (Last, First, Middle Initial) iTransact	Transactio	7 7		7.95
C.	Full Name (Last, First, Middle Initial)	Transactio	7 7		7.95 Allocated Activity or Event:
C.	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City	State	n ID : H4.4469 Zip Code		7.95 Allocated Activity or Event: Administrative Fundraising Exempt
c.	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City Farmington		n ID : H4.4469		Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support
C.	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City Farmington Purpose of Disbursement: Merchant Processing Fees	State	n ID : H4.4469 Zip Code		Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
C.	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City Farmington Purpose of Disbursement:	State	n ID : H4.4469 Zip Code	3.97	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
c.	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City Farmington Purpose of Disbursement: Merchant Processing Fees Activity or Event Identifier:	State	n ID : H4.4469 Zip Code	3.97 001 Category/ Type	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1001.12
C.	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City Farmington Purpose of Disbursement: Merchant Processing Fees Activity or Event Identifier: Administrative	State UT	Zip Code 84025	3.97 001 Category/ Type	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1001.12 Date 10 10 2014
	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City Farmington Purpose of Disbursement: Merchant Processing Fees Activity or Event Identifier: Administrative FEDERAL SHARE	State UT	Zip Code 84025	3.97 001 Category/ Type SHARE	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1001.12 Date 10 10 2014
	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City Farmington Purpose of Disbursement: Merchant Processing Fees Activity or Event Identifier: Administrative	State UT	Zip Code 84025	3.97 O01 Category/ Type SHARE 13.62	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1001.12 Date 10 10 2014
	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City Farmington Purpose of Disbursement: Merchant Processing Fees Activity or Event Identifier: Administrative FEDERAL SHARE 13.63	State UT +	n ID : H4.4469 Zip Code 84025 NONFEDERAL	3.97 O01 Category/ Type SHARE 13.62	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1001.12 Date 10 10 2014 TOTAL AMOUNT
SI	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City Farmington Purpose of Disbursement: Merchant Processing Fees Activity or Event Identifier: Administrative FEDERAL SHARE 13.63 JBTOTAL of Allocated Federal and NonFeder FEDERAL SHARE 32.59 OTAL This Period (last page for each line or	State UT + eral Activity Th	NONFEDERAL is Page NONFEDERAL are to 21(a)(i) and	3.97 O01 Category/ Type SHARE 13.62 SHARE 32.56	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1001.12 TOTAL AMOUNT TOTAL AMOUNT TOTAL AMOUNT 1001.12 TOTAL AMOUNT
	Full Name (Last, First, Middle Initial) iTransact Mailing Address PO Box 999 314 South 200 West City Farmington Purpose of Disbursement: Merchant Processing Fees Activity or Event Identifier: Administrative FEDERAL SHARE 13.63 JBTOTAL of Allocated Federal and NonFederal SHARE 32.59	State UT + eral Activity Th	NONFEDERAL NONFEDERAL	3.97 O01 Category/ Type SHARE 13.62 SHARE 32.56	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1001.12 Date 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y