

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

MAJORITY COMMITTEE PAC--MC PAC

ADDRESS (number and street) P.O. BOX 10134

Check if different than previously reported. (ACC) BAKERSFIELD CA 93389-3389

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00428052

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

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

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [08] / [01] / [2012] through [08] / [31] / [2012]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer CM Brunni

Signature of Treasurer CM Brunni [Electronically Filed] Date [09] / [20] / [2012]

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**MAJORITY COMMITTEE PAC--MC PAC**

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="2012"/>		176060.64
(b) Cash on Hand at Beginning of Reporting Period.....	139270.91	
(c) Total Receipts (from Line 19) .....	49500	779585.76
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	188770.91	955646.4
7. Total Disbursements (from Line 31).....	67485.5	834360.99
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	121285.41	121285.41
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	

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

**MAJORITY COMMITTEE PAC--MC PAC**

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).....	4500	111750
(ii) Unitemized .....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4500	111750
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	45000	647985.76
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	49500	759735.76
12. Transfers From Affiliated/Other Party Committees.....	0	15000
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	1000
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	3850
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	49500	779585.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	49500	779585.76

**DETAILED SUMMARY PAGE**

of Disbursements

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	42485.5	234939.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	42485.5	234939.39
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000	591921.6
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	2500
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	2500
29. Other Disbursements .....	5000	5000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	67485.5	834360.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	67485.5	834360.99

**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) .....	49500	759735.76
34. Total Contribution Refunds (from Line 28(d)) .....	0	2500
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	49500	757235.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	42485.5	234939.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	1000
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	42485.5	233939.39

**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 6 OF 27
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial) <b>A. Kelly Kidwell</b>		Date of Receipt 08 / 22 / 2012 <b>Transaction ID : SA11AI-1165-2487-c</b>
Mailing Address 335 Alamosa Drive		Amount of Each Receipt this Period 2500
City Claremont	State CA	Zip Code 91711
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific Advisors	Occupation President & Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500	

Full Name (Last, First, Middle Initial) <b>B. Julie Pinkerton</b>		Date of Receipt 08 / 01 / 2012 <b>Transaction ID : SA11AI-2228-2357-c</b>
Mailing Address 5874 Garrison Road		Amount of Each Receipt this Period 1000
City Franklin	State TN	Zip Code 37064
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific Life	Occupation Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000	

Full Name (Last, First, Middle Initial) <b>C. Gregory Nickerson</b>		Date of Receipt 08 / 03 / 2012 <b>Transaction ID : SA11AI-2275-2447-c</b>
Mailing Address 11215 Marwood Hill Drive		Amount of Each Receipt this Period 1000
City Potomac	State MD	Zip Code 20854
FEC ID number of contributing federal political committee. C		
Name of Employer Washington Tax Group	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4500.00

**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 7 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)  
**A. Raytheon Company Political Action Committee**

Mailing Address 1100 Wilson Boulevard  
Suite 1500

City Arlington State VA Zip Code 22209-3900

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4500

Date of Receipt  
08 / 02 / 2012  
**Transaction ID : SA11C-1743-2442-c**

Amount of Each Receipt this Period  
1000

Full Name (Last, First, Middle Initial)  
**B. American Benefits Council PAC**

Mailing Address 1501 M Street NW  
Suite 600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00153171**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500

Date of Receipt  
08 / 03 / 2012  
**Transaction ID : SA11C-2276-2449-c**

Amount of Each Receipt this Period  
1500

Full Name (Last, First, Middle Initial)  
**C. General Dynamics Corporation PAC (GDC PAC)**

Mailing Address 2941 Fairview Park Drive  
Suite 100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
08 / 03 / 2012  
**Transaction ID : SA11C-680-2446-c**

Amount of Each Receipt this Period  
2500

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> 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 27  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)  
**A. National Cotton Council Committee for the Advancement of Cotton**

Mailing Address PO Box 2995

City Cordova State TN Zip Code 38088-2995

FEC ID number of contributing federal political committee. **C C00023028**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**08 / 03 / 2012**

**Transaction ID : SA11C-1212-2448-c**

Amount of Each Receipt this Period  
 **1000**

Full Name (Last, First, Middle Initial)  
**B. Real Estate Roundtable Political Action Committee (REALPAC)**

Mailing Address 801 Pennsylvania Avenue NW Suite 720

City Washington State DC Zip Code 20004-2686

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**08 / 03 / 2012**

**Transaction ID : SA11C-1242-2445-c**

Amount of Each Receipt this Period  
 **5000**

Full Name (Last, First, Middle Initial)  
**C. Altria Group, Inc. PAC**

Mailing Address 101 Constitution Avenue NW Suite 400 West

City Washington State DC Zip Code 20001-2155

FEC ID number of contributing federal political committee. **C C00089136**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**08 / 13 / 2012**

**Transaction ID : SA11C-667-2455-c**

Amount of Each Receipt this Period  
 **5000**

**SUBTOTAL** of Receipts This Page (optional)..... **11000.00**

**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 9 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial) <b>A. Building Owners &amp; Managers Association PAC (BOMA PAC)</b>		Date of Receipt
Mailing Address 1101 15th Street NW Suite 800		<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b> C00106435		<b>Transaction ID : SA11C-2280-2454-c</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2500"/>
Aggregate Year-to-Date ▼ <input type="text" value="2500"/>		

Full Name (Last, First, Middle Initial) <b>B. Davita, Inc. Political Action Committee</b>		Date of Receipt
Mailing Address 601 Hawaii Street Unit C		<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City El Segundo	State CA	Zip Code 90245-4814
FEC ID number of contributing federal political committee. <b>C</b> C00340943		<b>Transaction ID : SA11C-578-2453-c</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="5000"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000"/>		

Full Name (Last, First, Middle Initial) <b>C. Motorola Solutions, Inc. PAC</b>		Date of Receipt
Mailing Address 1455 Pennsylvania Avenue NW Suite 900		<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. <b>C</b> C00075341		<b>Transaction ID : SA11C-2279-2452-c</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2000"/>
Aggregate Year-to-Date ▼ <input type="text" value="2000"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="9500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 10 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)  
**A. National Roofing Contractors Association Roof PAC**

Mailing Address 324 4th Street NE

City	State	Zip Code
Washington	DC	20002-5824

FEC ID number of contributing federal political committee. **C** C00244863

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2012

**Transaction ID : SA11C-1688-2451-c**

Amount of Each Receipt this Period  
1000

Full Name (Last, First, Middle Initial)  
**B. Sycuan Band of the Kumeyaay Nation**

Mailing Address 5459 Sycuan Road

City	State	Zip Code
El Cajon	CA	92019-1821

FEC ID number of contributing federal political committee. **C** C90009143

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2012

**Transaction ID : SA11C-765-2457-c**

Amount of Each Receipt this Period  
2500

Full Name (Last, First, Middle Initial)  
**C. USA Rice Federation PAC**

Mailing Address 4301 Fairfax Drive  
Suite 425

City	State	Zip Code
Arlington	VA	22203

FEC ID number of contributing federal political committee. **C** C00308478

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2012

**Transaction ID : SA11C-2193-2456-c**

Amount of Each Receipt this Period  
1000

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> 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 11 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)  
**A. Amylin Pharmaceuticals, Inc. Political Action Committee**

Mailing Address 601 13th Street NW  
Floor 11

City Washington State DC Zip Code 20005-3822

FEC ID number of contributing federal political committee. **C C00427021**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500

Date of Receipt  
08 / 16 / 2012  
**Transaction ID : SA11C-2285-2464-c**

Amount of Each Receipt this Period  
1500

Full Name (Last, First, Middle Initial)  
**B. USAA Employee PAC**

Mailing Address 601 Pennsylvania Avenue NW  
# 225

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00164145**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
08 / 16 / 2012  
**Transaction ID : SA11C-478-2463-c**

Amount of Each Receipt this Period  
5000

Full Name (Last, First, Middle Initial)  
**c. Blue Shield of California PAC**

Mailing Address 50 Beale Street  
Unit 18-105

City San Francisco State CA Zip Code 94105-1813

FEC ID number of contributing federal political committee. **C C00340364**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
08 / 20 / 2012  
**Transaction ID : SA11C-359-2484-c**

Amount of Each Receipt this Period  
2500

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9000.00
<b>TOTAL</b> 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 12 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)  
**A. Microsoft Corporation Political Action Committee**

Mailing Address 16011 Northeast 36th Way

City	State	Zip Code
Redmond	WA	98052-6301

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2012

**Transaction ID : SA11C-696-2482-c**

Amount of Each Receipt this Period  
5000

Full Name (Last, First, Middle Initial)  
**B. Western United Dairymen PAC**

Mailing Address 1315 K Street

City	State	Zip Code
Modesto	CA	95354

FEC ID number of contributing federal political committee. **C** C00186072

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2012

**Transaction ID : SA11C-2314-2483-c**

Amount of Each Receipt this Period  
1000

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City	State	Zip Code

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	45000.00

**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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. 300 New Jersey Partners**

Mailing Address 300 New Jersey Avenue NW  
Suite 601

City Washington State DC Zip Code 20001

Purpose of Disbursement  
PAC Rent

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2221-2349-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Capital Gifts and Awards, Inc**

Mailing Address 2012 Renard Court  
Unit K

City Annapolis State MD Zip Code 21401-6761

Purpose of Disbursement  
PAC Gifts & Mementos

**006**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1690-2351-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Election Mail**

Mailing Address 1101 Pennsylvania Avenue NW  
Floor 6

City Washington State DC Zip Code 20004-2544

Purpose of Disbursement  
PAC E-Merchant Fee

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-709-2468-e**

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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial) <b>A. Grand Valley Consulting</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012
Mailing Address 213 Ashby Street		<b>Transaction ID : SB21B-1570-2444-e</b>
City Alexandria	State VA	
Purpose of Disbursement SEE MEMO ITEMS		Amount of Each Disbursement this Period 14058.04
Candidate Name		Category/ Type 003
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>B. Grand Valley Consulting</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012
Mailing Address 213 Ashby Street		<b>Transaction ID : SB21B-1570-663-V</b>
City Alexandria	State VA	
Purpose of Disbursement PAC Fundraising Consulting		Amount of Each Disbursement this Period 10000
Candidate Name		Category/ Type 003
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: _____	

**[MEMO ITEM]**  
Subitemization of Grand Valley Consulting ( 08/17/12 )

Full Name (Last, First, Middle Initial) <b>C. Grand Valley Consulting</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012
Mailing Address 213 Ashby Street		<b>Transaction ID : SB21B-1570-664-V</b>
City Alexandria	State VA	
Purpose of Disbursement PAC Airfare		Amount of Each Disbursement this Period 235.8
Candidate Name		Category/ Type 002
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: _____	

**[MEMO ITEM]**  
Subitemization of Grand Valley Consulting ( 08/17/12 )

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14058.04
<b>TOTAL</b> 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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial) <b>A. Grand Valley Consulting</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012	
Mailing Address 213 Ashby Street		<b>Transaction ID : SB21B-1570-665-V</b>	
City Alexandria	State VA	Zip Code 22305-2902	<b>Amount of Each Disbursement this Period</b> 3735.31
Purpose of Disbursement PAC Catering		Category/ Type 003	<b>[MEMO ITEM]</b> Subitemization of Grand Valley Consulting ( 08/17/12 )
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>B. Grand Valley Consulting</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012	
Mailing Address 213 Ashby Street		<b>Transaction ID : SB21B-1570-666-V</b>	
City Alexandria	State VA	Zip Code 22305-2902	<b>Amount of Each Disbursement this Period</b> 12
Purpose of Disbursement PAC Parking		Category/ Type 002	<b>[MEMO ITEM]</b> Subitemization of Grand Valley Consulting ( 08/17/12 )
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>C. Grand Valley Consulting</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2012	
Mailing Address 213 Ashby Street		<b>Transaction ID : SB21B-1570-667-V</b>	
City Alexandria	State VA	Zip Code 22305-2902	<b>Amount of Each Disbursement this Period</b> 74.93
Purpose of Disbursement PAC Express Shipping		Category/ Type 001	<b>[MEMO ITEM]</b> Subitemization of Grand Valley Consulting ( 08/17/12 )
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: _____			
<b>SUBTOTAL</b> of Disbursements This Page (optional).....		0.00	
<b>TOTAL</b> 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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Mcguirewoods Llp**

Mailing Address 1 James Center

City Richmond State VA Zip Code 23219-4089

Purpose of Disbursement  
PAC Legal Consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1363-2443-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address 4905 Del Ray Avenue Suite 401

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
SEE MEMO ITEMS

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2281-2458-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Campaign Financial Services**

Mailing Address 4905 Del Ray Avenue Suite 401

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
PAC Compliance Consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2281-669-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
Subitemization of Campaign Financial Services (08/21/12)

**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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Financial Services**

Mailing Address 4905 Del Ray Avenue  
Suite 401

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
PAC Compliance Consulting

Candidate Name

**001**  
Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2281-668-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of Campaign Financial Services (08/21/12)

Full Name (Last, First, Middle Initial)

**B. Campaign Financial Services**

Mailing Address 4905 Del Ray Avenue  
Suite 401

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
PAC Compliance Consulting

Candidate Name

**001**  
Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2281-670-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of Campaign Financial Services (08/21/12)

Full Name (Last, First, Middle Initial)

**C. Campaign Financial Services**

Mailing Address 4905 Del Ray Avenue  
Suite 401

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
PAC Express Mail

Candidate Name

**001**  
Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2281-671-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of Campaign Financial Services (08/21/12)

**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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Financial Services**

Mailing Address 4905 Del Ray Avenue  
Suite 401

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
PAC E-Merhcant Fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-2281-672-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of Campaign Financial Services ( 08/21/12 )

Full Name (Last, First, Middle Initial)

**B. Election Mail**

Mailing Address 1101 Pennsylvania Avenue NW  
Floor 6

City Washington State DC Zip Code 20004-2544

Purpose of Disbursement  
PAC E-Merchant Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-709-2467-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address 1 PO Box

City Los Angeles State CA Zip Code 90096-0001

Purpose of Disbursement  
SEE MEMO ITEMS

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-294-2461-e**

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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. DC Taste**

Mailing Address 1600 Fitzgerald Lane

City Alexandria State VA Zip Code 22302

Purpose of Disbursement  
PAC Catering

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	2

**Transaction ID : SB21B-2121-684-V**

Amount of Each Disbursement this Period

1	5	0	7	.	0	1
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**[MEMO ITEM]**

Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**B. DC Taste**

Mailing Address 1600 Fitzgerald Lane

City Alexandria State VA Zip Code 22302

Purpose of Disbursement  
PAC Catering

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	2

**Transaction ID : SB21B-2121-693-V**

Amount of Each Disbursement this Period

1	2	9	6	.	7	5
---	---	---	---	---	---	---

**[MEMO ITEM]**

Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**C. DC Taste**

Mailing Address 1600 Fitzgerald Lane

City Alexandria State VA Zip Code 22302

Purpose of Disbursement  
PAC Catering

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	2

**Transaction ID : SB21B-2121-694-V**

Amount of Each Disbursement this Period

9	2	6	.	8	9
---	---	---	---	---	---

**[MEMO ITEM]**

Subitemization of American Express ( 08/24/12 )

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

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

0	0	0	0	.	0	0
---	---	---	---	---	---	---

0	0	0	0	.	0	0
---	---	---	---	---	---	---

**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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Chariots for Hire**

Mailing Address 21915 Shaw Road

City Sterling State VA Zip Code 20164

Purpose of Disbursement  
PAC Transportation

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B-2212-679-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**B. Rosa Mexicano**

Mailing Address 575 7th Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
PAC Catering

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B-2288-683-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**C. Golden State Air Charter**

Mailing Address 1535 Boughton Drive

City Bakersfield State CA Zip Code 93308-1621

Purpose of Disbursement  
PAC Airfare

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B-604-689-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of American Express ( 08/24/12 )

**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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial) <b>A. Golden State Air Charter</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2012
Mailing Address 1535 Boughton Drive		<b>Transaction ID : SB21B-604-696-V</b>
City Bakersfield	State CA	
Purpose of Disbursement PAC Airfare	Candidate Name	Amount of Each Disbursement this Period 2854.27
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) ▼	<b>[MEMO ITEM]</b> Subitemization of American Express ( 08/24/12 )
State: District:	Category/Type 002	

Full Name (Last, First, Middle Initial) <b>B. Ruths Chris Steakhouse (DC)</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2012
Mailing Address 724 9th Street NW		<b>Transaction ID : SB21B-610-686-V</b>
City Washington	State DC	
Purpose of Disbursement PAC Catering	Candidate Name	Amount of Each Disbursement this Period 2289.37
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) ▼	<b>[MEMO ITEM]</b> Subitemization of American Express ( 08/24/12 )
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) <b>C. Oceanaire (DC)</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2012
Mailing Address 1201 F Street NW		<b>Transaction ID : SB21B-612-690-V</b>
City Washington	State DC	
Purpose of Disbursement PAC Catering	Candidate Name	Amount of Each Disbursement this Period 308.18
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) ▼	<b>[MEMO ITEM]</b> Subitemization of American Express ( 08/24/12 )
State: District:	Category/Type 003	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement  
PAC Meal Expenses

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B-713-677-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**B. Charlie Palmer Steak**

Mailing Address 101 Constitution Avenue NW

City Washington State DC Zip Code 20001-2133

Purpose of Disbursement  
PAC Catering

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B-872-674-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**C. Federal Express**

Mailing Address 3610 Hacks Cross Road

City Memphis State TN Zip Code 38125-8800

Purpose of Disbursement  
PAC Express Mail

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B-1057-673-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
Subitemization of American Express ( 08/24/12 )

**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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address 3610 Hacks Cross Road

City Memphis State TN Zip Code 38125-8800

Purpose of Disbursement  
PAC Express Mail

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1057-687-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**B. Federal Express**

Mailing Address 3610 Hacks Cross Road

City Memphis State TN Zip Code 38125-8800

Purpose of Disbursement  
PAC Express Shipping

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1057-682-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**C. Federal Express**

Mailing Address 3610 Hacks Cross Road

City Memphis State TN Zip Code 38125-8800

Purpose of Disbursement  
PAC Express Shipping

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1057-692-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of American Express ( 08/24/12 )

**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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address 3610 Hacks Cross Road

City Memphis State TN Zip Code 38125-8800

Purpose of Disbursement  
PAC Express Mail

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	4			2	0	1	2		

Transaction ID : SB21B-1057-699-V

Amount of Each Disbursement this Period

3	3	2	.	5
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[MEMO ITEM]

Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**B. Federal Express**

Mailing Address 3610 Hacks Cross Road

City Memphis State TN Zip Code 38125-8800

Purpose of Disbursement  
PAC Express Mail

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	4			2	0	1	2		

Transaction ID : SB21B-1057-702-V

Amount of Each Disbursement this Period

1	5	7	.	1	4
---	---	---	---	---	---

[MEMO ITEM]

Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**C. Capital Grille**

Mailing Address 601 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-2601

Purpose of Disbursement  
PAC Catering

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	4			2	0	1	2		

Transaction ID : SB21B-1205-698-V

Amount of Each Disbursement this Period

1	5	6	.	4	8
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[MEMO ITEM]

Subitemization of American Express ( 08/24/12 )

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

0	0	0
---	---	---

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

0	0	0
---	---	---

**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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Capital Grille**

Mailing Address 601 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-2601

Purpose of Disbursement  
PAC Catering

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1205-691-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Subitemization of American Express ( 08/24/12 )

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

Use separate schedule(s)  
for each category of the  
Detailed Summary 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)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Romney Victory Inc**

Mailing Address 585 Commercial Street

City Boston State MA Zip Code 02109-1024

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name  
**Mitt Romney**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2012

Transaction ID : **SB23-2278-2450-e**

Amount of Each Disbursement this Period

10000

Full Name (Last, First, Middle Initial)

**B. Weber For Congress**

Mailing Address 1100 Gulf Freeway S  
Suite 100

City League City State TX Zip Code 77573-5148

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name  
**Randy Weber**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 14

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 22 / 2012

Transaction ID : **SB23-2283-2459-e**

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

**C. Jonathan Paton For Congress**

Mailing Address 7400 N Oracle Road  
Suite 125

City Tucson State AZ Zip Code 85704-6339

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name  
**Jonathan Paton**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AZ District: 08

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 23 / 2012

Transaction ID : **SB23-1081-2460-e**

Amount of Each Disbursement this Period

5000

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

20000.00

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

20000.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

**A. Bachus Legal Expense Trust**

Mailing Address 228 South Washington Street  
Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
PAC Legal Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

012  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 01 / 2012

**Transaction ID : SB29-2239-2369-e**

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

**B.**

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

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

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

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

Amount of Each Disbursement this Period

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

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

5000.00

5000.00