

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
JOBS AND INNOVATION MATTER PAC (JIM PAC)

ADDRESS (number and street) PO Box 70980  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20024

2. **FEC IDENTIFICATION NUMBER** C00494112  
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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on 09 13 2011 in the State of NY  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on in the State of

5. Covering Period 07 01 2011 through 08 24 2011

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 Diane Evans

Signature of Treasurer Electronically Filed by Diane Evans Date 09 01 2011

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

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
JOBS AND INNOVATION MATTER PAC (JIM PAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	8

D	D
2	4

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		0.00
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	29944.15									
(c) Total Receipts (from Line 19) .....	9581.64	53081.64								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	39525.79	53081.64								
7. Total Disbursements (from Line 31) .....	18888.99	32444.84								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	20636.80	20636.80								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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

JOBS AND INNOVATION MATTER PAC (JIM PAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	8

D	D
2	4

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	9581.64	53081.64
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9581.64	53081.64
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	9581.64	53081.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9581.64	53081.64

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	17888.99	21444.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	17888.99	21444.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	1000.00	11000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18888.99	32444.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18888.99	32444.84

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) .....	9581.64	53081.64
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9581.64	53081.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17888.99	21444.84
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17888.99	21444.84

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 12  
(check only one)

<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

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)  
JOBS AND INNOVATION MATTER PAC (JIM PAC)

**A.**

Full Name (Last, First, Middle Initial)  
AETNA INC. POLITICAL ACTION COMMITTEE

Mailing Address 20 F STREET, N.W.  
SUITE 350

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00181826

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 13 / 2011

Transaction ID: SA11C.4174

Amount of Each Receipt this Period  
2500.00

**B.**

Full Name (Last, First, Middle Initial)  
DIAGEO NORTH AMERICA INC EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE

Mailing Address 801 MAIN AVENUE

City State Zip Code  
NORWALK CT 06851

FEC ID number of contributing federal political committee. **C** C00034470

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1253.08

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2011

Transaction ID: SA11C.4181

Amount of Each Receipt this Period  
1253.08

In-kind - Beverages for Event

**C.**

Full Name (Last, First, Middle Initial)  
DIAGEO NORTH AMERICA INC EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE

Mailing Address 801 MAIN AVENUE

City State Zip Code  
NORWALK CT 06851

FEC ID number of contributing federal political committee. **C** C00034470

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2081.64

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 16 / 2011

Transaction ID: SA11C.4184

Amount of Each Receipt this Period  
828.56

In-kind - Beverages for Event

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4581.64**

**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: <span style="float: right;">PAGE 7 / 12</span>
	(check only one)
<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)  
**JOBS AND INNOVATION MATTER PAC (JIM PAC)**

**A.**

Full Name (Last, First, Middle Initial) FMR LLC POLITICAL ACTION COMMITTEE (FIDELITY PAC)		Date of Receipt
Mailing Address 82 DEVONSHIRE STREET N5A		<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
City	State	Zip Code
BOSTON	MA	02109
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4176
<input type="text" value="C"/> <input type="text" value="C00215046"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="2500.00"/>
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="2500.00"/>

**B.**

Full Name (Last, First, Middle Initial) TITLE INDUSTRY POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 1828 L ST NW SUITE 705		<input type="text" value="08"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
City	State	Zip Code
WASHINGTON	DC	20036
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4178
<input type="text" value="C"/> <input type="text" value="C00012914"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="2500.00"/>
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="2500.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="9581.64"/>

# 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)  
JOBS AND INNOVATION MATTER PAC (JIM PAC)

A.	Full Name (Last, First, Middle Initial) Collyer Catering <hr/> Mailing Address 37 Saugatuck Ave <hr/> City Westport State CT Zip Code 06880 <hr/> Purpose of Disbursement Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4188 Date of Disbursement 07 / 22 / 2011 <hr/> Amount of Each Disbursement this Period 1828.96
B.	Full Name (Last, First, Middle Initial) DIAGEO NORTH AMERICA INC EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE <hr/> Mailing Address 801 MAIN AVENUE <hr/> City NORWALK State CT Zip Code 06851 <hr/> Purpose of Disbursement In-kind - Beverages for Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4183 Date of Disbursement 07 / 15 / 2011 <hr/> Amount of Each Disbursement this Period 1253.08
C.	Full Name (Last, First, Middle Initial) DIAGEO NORTH AMERICA INC EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE <hr/> Mailing Address 801 MAIN AVENUE <hr/> City NORWALK State CT Zip Code 06851 <hr/> Purpose of Disbursement In-kind - Beverages for Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4185 Date of Disbursement 07 / 16 / 2011 <hr/> Amount of Each Disbursement this Period 828.56

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

3910.60

**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)  
JOBS AND INNOVATION MATTER PAC (JIM PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Evans &amp; Katz LLC</p> <p>Mailing Address 1831 Bay St SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4165</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="326.51"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Evans &amp; Katz LLC</p> <p>Mailing Address 1831 Bay St SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4171</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="721.27"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Fjord Caterer</p> <p>Mailing Address 158 E Putnam Ave</p> <p>City Cos Cob State CT Zip Code 06807</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4163</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7060.33"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8108.11"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 10 / 12

<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)  
JOBS AND INNOVATION MATTER PAC (JIM PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Fjord Caterer  Mailing Address 158 E Putnam Ave  City Cos Cob State CT Zip Code 06807  Purpose of Disbursement Catering Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.4192 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 1 1	Amount of Each Disbursement this Period  54.50
<b>B.</b>	Full Name (Last, First, Middle Initial) Fjord Caterer  Mailing Address 158 E Putnam Ave  City Cos Cob State CT Zip Code 06807  Purpose of Disbursement Catering Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.4193 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 1 1	Amount of Each Disbursement this Period  120.11
<b>C.</b>	Full Name (Last, First, Middle Initial) Heritage Yacht Charter  Mailing Address 500 Steamboat Rd  City Greenwich State CT Zip Code 06830  Purpose of Disbursement Boat Rental for Event Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.4190 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 1 1	Amount of Each Disbursement this Period  424.03

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>598.64</b>
<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)  
JOBS AND INNOVATION MATTER PAC (JIM PAC)

A.

Full Name (Last, First, Middle Initial)  
The Conrad Group

Mailing Address 50 E St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Fundraising Consulting Services and Travel Reimbursement

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB21B.4169  
Date of Disbursement

08 / 01 / 2011

Amount of Each Disbursement this Period

5171.64

B.

Full Name (Last, First, Middle Initial)  
Amtrak

Mailing Address 60 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB21B.4169.5  
Date of Disbursement

08 / 01 / 2011

Amount of Each Disbursement this Period

245.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Alliance Limousine

Mailing Address 838 High Ridge Rd

City Stamford State CT Zip Code 06905

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB21B.4169.7  
Date of Disbursement

08 / 01 / 2011

Amount of Each Disbursement this Period

1219.85

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

5171.64

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

17788.99

**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)

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<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)  
JOBS AND INNOVATION MATTER PAC (JIM PAC)

A.

Full Name (Last, First, Middle Initial)  
David Weprin for Congress

Transaction ID: SB23.4166  
Date of Disbursement

Mailing Address 72-50 Austin St  
Second Floor

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	1

City Forest Hills State NY Zip Code 11375

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
Contribution

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Category/  
Type

Candidate Name  
David I Weprin

Office Sought:  House  
 Senate  
 President  
State: NY District: 09

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼  
Special-General

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

1000.00
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TOTAL This Period (last page this line number only) ..... ►

1000.00
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