

**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

Financial Service Centers of America, Inc.

ADDRESS (number and street)

Court Plaza South 21 Main St,

Suite 101

☐Check if different  
than previously  
reported. (ACC)

Hackensack

NJ

07602

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00232843

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

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2010

through

03

31

2010

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

Henry F. Shyne

Signature of Treasurer

Electronically Filed by Henry F. Shyne

Date

04

07

2010

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

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 21

Write or Type Committee Name  
Financial Service Centers of America, Inc.

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	<div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>2010</div></div>	<div>32328.08</div>
(b) Cash on Hand at Beginning of Reporting Period .....	<div>32328.08</div>	
(c) Total Receipts (from Line 19) .....	<div>81500.00</div>	<div>81500.00</div>
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<div>113828.08</div>	<div>113828.08</div>
7. Total Disbursements (from Line 31) .....	<div>25537.20</div>	<div>25537.20</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div>88290.88</div>	<div>88290.88</div>
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	

☒ 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)

3 / 21

Write or Type Committee Name

Financial Service Centers of America, Inc.

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	76500.00	76500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	76500.00	76500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	81500.00	81500.00
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)) .....	81500.00	81500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	81500.00	81500.00

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	1037.20	1037.20	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	1037.20	1037.20	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24500.00	24500.00	
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))..	25537.20	25537.20	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25537.20	25537.20	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	81500.00	81500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	81500.00	81500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1037.20	1037.20
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1037.20	1037.20

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

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

FOR LINE NUMBER: PAGE 6 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

V.C. Andracchio, II

Mailing Address 3801 Sunset Avenue W.

City

Rocky Mount

State

NC

Zip Code

27804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Friendly Check Cashing

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.5809

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mr. Richard Barr

Mailing Address 425 Huehl Road  
#3

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CFSC

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5814

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Dennis Bassford

Mailing Address 6720 Fort Dent Way #230

City

Seattle

State

WA

Zip Code

98188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Moneytree, Inc.

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5813

Amount of Each Receipt this Period

2500.00

Contribution

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

7500.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

A.

Full Name (Last, First, Middle Initial)

Ismael Bentancourt

Mailing Address 436 Kelly Ct.

City

Wyckoff

State

NJ

Zip Code

07481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lazer Check CashingOccupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.5834

Amount of Each Receipt this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Jason Carballo

Mailing Address 22 Woodland

City

Montvale

State

NJ

Zip Code

07645

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Castle Financial ServicesOccupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.5826

Amount of Each Receipt this Period

2500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Aggie Clark

Mailing Address 6720 Fort Dent Way  
Suite 230

City

Tulwila

State

WA

Zip Code

98188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Moneytree, Inc.Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5812

Amount of Each Receipt this Period

2500.00

Contribution

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

7500.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

<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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Gary Dachis

Mailing Address 10550 Wayzata Blvd.

City

Minnetona

State

MN

Zip Code

55305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unbank Company LLPOccupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	6	/	2	0	1	0

Transaction ID: SA11AI.5807

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mr. Randy Dotemoto

Mailing Address 17019 Kingsview Avenue

City

Carson

State

CA

Zip Code

90746-1220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nix Check CashingOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5803

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Fred Evensen

Mailing Address 223 Gull Drive

City

Elyria

State

OH

Zip Code

44035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CashsmartOccupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5818

Amount of Each Receipt this Period

2500.00

Contribution

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

7500.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Jose Fernandez

Mailing Address 17 Kathy Lane

City

Warren

State

NJ

Zip Code

07059

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Friendly Check Cashing

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5849

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Abby L Hans

Mailing Address 20518 N Milwaukee Ave

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hans Management Inc.

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.5833

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John Iberl

Mailing Address 194 Michael John Road

City

Park Ridge

State

IL

Zip Code

60068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CCEA

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.5848

Amount of Each Receipt this Period

500.00

Contribution

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

5500.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Richard Klein

Mailing Address 359 Long Avenue

City

Hillside

State

NJ

Zip Code

07205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Garden State C/C Service,  
Inc.

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5805

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mr. Ira Krell

Mailing Address 3015 Third Avenue

City

Bronx

State

NY

Zip Code

10455

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
David's Financial Corp.

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.5800

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard D. Lake

Mailing Address 1956 Webster Street  
Suite 200

City

Oakland

State

CA

Zip Code

94612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California Check Cashing  
Store

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.5804

Amount of Each Receipt this Period

5000.00

Contribution

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

10000.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Allan Leving

Mailing Address 1809 Olive

City

Saint Louis

State

MO

Zip Code

63103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kingshighway Properties

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5822

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Emanuel Levy

Mailing Address 163 Bayside Drive

City

Atlantic Beach

State

NY

Zip Code

11509

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYC Check Express

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5817

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Martin A. Lieberman

Mailing Address 1352 Wessling Drive

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central Clearing Co.

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5816

Amount of Each Receipt this Period

2500.00

Contribution

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

7500.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

James T Marchesi

Mailing Address 4755 Clay Peak Drive

City

Las Vegas

State

NV

Zip Code

89129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Check City

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5820

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Eric Norrington

Mailing Address 6514 Barkwood Lane

City

Dallas

State

TX

Zip Code

75248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ACE Cash Express

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.5858

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Arthur Roth

Mailing Address 10 Ashbridge lane

City

Linwood

State

NJ

Zip Code

08221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Casino Hotel Emp. Check  
Cashin

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5828

Amount of Each Receipt this Period

2500.00

Contribution

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

7500.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Mr. R. Craig Schafer

Mailing Address 4-901G Kuhio Hwy

City

Kapaa

State

HI

Zip Code

96746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Money Service Ctrs of Haw-  
aii

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.5835

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Jay B. Shipowitz

Mailing Address 1231 Greenway Drive

City

Irving

State

TX

Zip Code

75038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ACE Cash Express, Inc.

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.5831

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Jeffrey Silverman

Mailing Address 790 Estate Drive #100

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
M.S. Management Company

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5802

Amount of Each Receipt this Period

2500.00

Contribution

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

6000.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Larry Slonina

Mailing Address 425 Huehl Road  
Bldg #3

City State Zip Code  
Northbrook IL 60062

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
U.S. Advisory Services

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.5801

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Bill Smith

Mailing Address 300 Devon Drive

City State Zip Code  
Homewood AZ 35209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Easy Money

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5827

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

William P. Staderman

Mailing Address 104 72nd Street

City State Zip Code  
Brooklyn NY 11209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
W.P.S. Systems

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5824

Amount of Each Receipt this Period

2500.00

Contribution

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

7500.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Jerry Stogner

Mailing Address PO Box 1683

City

McComb

State

MS

Zip Code

39649

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
East McComb Check Cash,  
Inc.

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.5811

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Stuart Tapper

Mailing Address 10550 Wayzata Blvd

City

Minnetonka

State

MN

Zip Code

55305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unbank Company LLP

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.5808

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John Templer

Mailing Address P.O. Box 9878

City

Amarillo

State

TX

Zip Code

79105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Exchange Services/Mr. Pay-  
roll

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5815

Amount of Each Receipt this Period

2500.00

Contribution

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

7500.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 21

(check only one)

<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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Robert M. Zweig

Mailing Address 20 Starflower Ter

City

San Ramon

State

CA

Zip Code

94583-5356

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Check CenterOccupation  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5798

Amount of Each Receipt this Period

2500.00

Contribution

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

2500.00

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

76500.00



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

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

FOR LINE NUMBER: PAGE 17 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
CHECKSMART FINANCIAL LLC PAC

Mailing Address 7001 POST ROAD

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

**C**

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  
0 3 / 0 8 / 2 0 1 0

Transaction ID: SA11C.5830

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
PLS GOOD NEIGHBOR PAC

Mailing Address P.O. Box 7519

City State Zip Code  
CHICAGO IL 60680

FEC ID number of contributing  
federal political committee.

**C**

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  
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11C.5832

Amount of Each Receipt this Period

2500.00

Contribution

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

5000.00

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

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 21

<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)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 53852

City  
Phoenix

State  
AZ

Zip Code  
85072-3852

Purpose of Disbursement  
Service Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.5845

Date of Disbursement

/   /

Amount of Each Disbursement this Period

516.25

**B.**

Full Name (Last, First, Middle Initial)

Merchant Service

Mailing Address 7300 Chapman Highway

City  
Knoxville

State  
TN

Zip Code  
37920

Purpose of Disbursement  
Service Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.5847

Date of Disbursement

/   /

Amount of Each Disbursement this Period

360.45

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

876.70

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

876.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 / 21

<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)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Ackerman for Congress

**Transaction ID:** SB23.5840

Date of Disbursement

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

Mailing Address P.O. Box 15616  
Southeast Station

Amount of Each Disbursement this Period

City Washington State DC Zip Code 20003

2000.00									
---------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

KAREN BASS

**Transaction ID:** SB23.5850

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	0

Mailing Address 777 S FIGUEROA STREET SUITE 4050

Amount of Each Disbursement this Period

City LOS ANGELES State CA Zip Code 90017

1500.00									
---------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 33

**C.**

Full Name (Last, First, Middle Initial)

DIAZ-BALART, MARIO

**Transaction ID:** SB23.5825

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	1	0

Mailing Address 7270 NW 6 STREET

Amount of Each Disbursement this Period

City MIAMI State FL Zip Code 33126

1000.00									
---------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 25

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

4500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 / 21

<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)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

HASTINGS FOR CONGRESS

Mailing Address P.O. BOX 9352

City State Zip Code  
FT. LAUDERDALE FL 33310Purpose of Disbursement  
Contribution

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 23

Transaction ID: SB23.5852

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	0

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**B.**

Full Name (Last, First, Middle Initial)

W BLAINE LUETKEMEYER

Mailing Address 215 MAIN STREET

City State Zip Code  
ST ELIZABETH MO 65075Purpose of Disbursement  
Contribution

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MO District: 09

Transaction ID: SB23.5856

Date of Disbursement

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

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**C.**

Full Name (Last, First, Middle Initial)

MALONEY FOR CONGRESS

Mailing Address 24 E. 93rd Street, Suite 1B

City State Zip Code  
NEW YORK NY 10128Purpose of Disbursement  
Contribution

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 14

Transaction ID: SB23.5841

Date of Disbursement

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

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

8000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 21

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Financial Service Centers of America, Inc.

**A.**

Full Name (Last, First, Middle Initial)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.5839

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10000.00

**B.**

Full Name (Last, First, Middle Initial)

ED MR ROYCE

Mailing Address P.O. Box 2525

City  
Orange

State  
CA

Zip Code  
92859

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 40

**Transaction ID:** SB23.5854

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

12000.00

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

24500.00