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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

RECOVERY PAC

ADDRESS (number and street) 182 E NORTH BROADWAY ST

Check if different than previously reported. (ACC)

COLUMBUS CA 43214-4112

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00442277

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

X NEW (N) OR

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) 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 (12S) Election on M M / D D / Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

X

5. Covering Period 04 01 2010 through 06 30 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 JOHN G. RITCHEY

Signature of Treasurer [Signature] Date 10 13 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 table with 8 columns and 1 row. FEC FORM 3X Rev. 12/2004

10030442746

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Recovery PAC

Report Covering the Period: From:

04 / 01 / 2010

To:

06 / 30 / 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <i>2010</i>		<i>1,609.26</i>
(b) Cash on Hand at Beginning of Reporting Period.....	<i>109.26</i>	
(c) Total Receipts (from Line 19)	<i>3,275.00</i>	<i>3,275.00</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<i>3,384.26</i>	<i>4,884.26</i>
7. Total Disbursements (from Line 31).....	<i>200000</i>	<i>3,500.00</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<i>1,384.26</i>	<i>1,384.26</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

10050442747

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

RECOVERY PAC

Report Covering the Period: From: *04 / 01 / 2010* To: *06 / 30 / 2010*

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).....	3,275.00	3,275.00
(ii) Unitemized.....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3,275.00	3,275.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Line 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	3,275.00	3,275.00
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3,275.00	3,275.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3,275.00	3,275.00

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DETAILED SUMMARY PAGE
of Disbursements

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Page 4

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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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	00	1500.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	00	1500.00
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2000.00	3500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2000.00	3500.00

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)	327500	327500
34. Total Contribution Refunds (from Line 28(d))	"	"
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	"	"
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	00	150000
37. Offsets to Operating Expenditures (from Line 15, page 3)	"	"
38. Net Operating Expenditures (subtract Line 37 from Line 36)	00	150000

10030442750

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 1 OF 3	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)
RECOVERY PAC

A. Full Name (Last, First, Middle Initial)
FROMM, BARRY H.

Mailing Address
2460 STONEHAVEN CT N.

City **COLUMBUS** State **OH** Zip Code **43220**

FEC ID number of contributing federal political committee.
00044

Name of Employer **VALUE RECOVERY GROUP** Occupation **CHIEF EXECUTIVE OFFICER**

Receipt For:
 Primary
 General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,250.00

Date of Receipt
04 02 2010

Amount of Each Receipt this Period
1,250.00

B. Full Name (Last, First, Middle Initial)
GRIFFITH RALPH E

Mailing Address
2715 YORK ROAD

City **CHAPER ACINGTON** State **OH** Zip Code **43221**

FEC ID number of contributing federal political committee.
C

Name of Employer **VALUE RECOVERY GROUP** Occupation **SERVICE VICE PRESIDENT**

Receipt For:
 Primary
 General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
04 02 2010

Amount of Each Receipt this Period
1,000.00

C. Full Name (Last, First, Middle Initial)
CONROY, KETHA

Mailing Address
10101 WATKINS ROAD

City **MARYSVILLE** State **OH** Zip Code **43040**

FEC ID number of contributing federal political committee.
C

Name of Employer **VALUE RECOVERY GROUP** Occupation **SVP DEVELOPMENT**

Receipt For:
 Primary
 General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
04 02 2010

Amount of Each Receipt this Period
1,000.00

SUBTOTAL of Receipts This Page (optional).....▶ **1,450.00**

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

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

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

FOR LINE NUMBER: PAGE 2 OF 3
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
RECOVERY PAC

A. Full Name (Last, First, Middle Initial) **SCHAEFER JR., A. TED**
 Mailing Address **3069 CARISBROOK ROAD**
 City **COLUMBUS** State **OH** Zip Code **43221**
 Date of Receipt **04 02 2010**
 Amount of Each Receipt this Period **1,000.00**
 Name of Employer **VALUE RECOVERY GROUP** Occupation **CHIEF TECHNOLOGY OFFICER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1,000.00**

B. Full Name (Last, First, Middle Initial) **GORBY, SHARON L**
 Mailing Address **2615 BRETON WOODS DRIVE**
 City **COLUMBUS** State **OH** Zip Code **43231**
 Date of Receipt **04 02 2010**
 Amount of Each Receipt this Period **100.00**
 Name of Employer **VALUE RECOVERY GROUP** Occupation **SUP ADMINISTRATION**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1,000.00**

C. Full Name (Last, First, Middle Initial) **HANN, HALL BETH**
 Mailing Address **7644 SESSIS DRIVE**
 City **WORTHINGTON** State **OH** Zip Code **43085**
 Date of Receipt **04 02 2010**
 Amount of Each Receipt this Period **250.00**
 Name of Employer **VALUE RECOVERY GROUP** Occupation **VICE PRESIDENT**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

SUBTOTAL of Receipts This Page (optional)..... **450.00**
TOTAL This Period (last page this line number only).....

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**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 3 OF 3	
	<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)
RECOVERY PAC

A. Full Name (Last, First, Middle Initial)
PRACHT, MICHAEL

Mailing Address
840 ARBORDALE LANE

City **WEXFORD** State **PA** Zip Code **15090**

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

Name of Employer **US RAILCAR LLC** Occupation **PRESIDENT**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **250.00**

Date of Receipt
04 02 2010

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
SISTO, JAMES E

Mailing Address
1097 HIGHLAND DRIVE

City **Columbus** State **OH** Zip Code **43220**

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

Name of Employer **VALUE RECOVERY GROUP** Occupation **CHIEF OPERATING OFFICER**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **1,125.00**

Date of Receipt
04 26 2010

Amount of Each Receipt this Period
1,125.00

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1,375.00
TOTAL This Period (last page this line number only).....▶	3,275.00

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**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 OF

<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)

RECOVERY PAC

Full Name (Last, First, Middle Initial)

A. <u>TIBERI FOR CONGRESS</u>		Date of Disbursement
Mailing Address <u>2931 E DUBLIN GRANVILLE ROAD</u>		<u>04 02 2010</u>
City	State	Zip Code
<u>COLUMBUS</u>	<u>OH</u>	<u>43231</u>
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
<u>CONTRIBUTION FOR REELECTION</u>		
Candidate Name		<u>2000.00</u>
<u>PAT TIBERI</u>		
Office Sought:	Disbursement For:	
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <u>OH</u> District: <u>12</u>		

B.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

2,000.00

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

2,000.00

10030442754

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Ex* Shipping Date
10/13/10
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

EA *10/14/10*
 PREPARER DATE PREPARED

10050442755