

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AMERICANS FOR NEW LEADERSHIP

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="2011"/>	<input type="text" value="21614.45"/>	<input type="text" value="21614.45"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="69.29"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5960.80"/>	<input type="text" value="18113.81"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="6030.09"/>	<input type="text" value="39728.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5569.03"/>	<input type="text" value="39267.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="461.06"/>	<input type="text" value="461.06"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

AMERICANS FOR NEW LEADERSHIP

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).....	1300.00	5850.00
(ii) Unitemized	4475.15	11973.15
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5775.15	17823.15
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5775.15	17823.15
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).....	185.65	290.65
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	0.01
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 Transfers (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))..... ▶	5960.80	18113.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5960.80	18113.81

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	5569.03	39167.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5569.03	39167.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	100.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5569.03	39267.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5569.03	39267.20

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)	5775.15	17823.15
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5775.15	17823.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5569.03	39167.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	185.65	290.65
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5383.38	38876.55

**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)
AMERICANS FOR NEW LEADERSHIP

A. Timothy Docter
Full Name (Last, First, Middle Initial)
Mailing Address 7778 Boca Raton Dr.
City Las Vegas State NV Zip Code 89113
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Civil Engineer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 11 / 05 / 2011
Transaction ID : SA11AI.4915
Amount of Each Receipt this Period 50.00

B. Timothy Docter
Full Name (Last, First, Middle Initial)
Mailing Address 7778 Boca Raton Dr.
City Las Vegas State NV Zip Code 89113
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Civil Engineer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 12 / 05 / 2011
Transaction ID : SA11AI.4937
Amount of Each Receipt this Period 50.00

C. KIMBERLY ESPOSITO
Full Name (Last, First, Middle Initial)
Mailing Address 6416 AUTUMN GOLD CT.
City COLUMBIA State MD Zip Code 21045
FEC ID number of contributing federal political committee. **C**
Name of Employer M&T Bank Occupation Equipment Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 07 / 21 / 2011
Transaction ID : SA11AI.4692
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... 150.00
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 7 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICANS FOR NEW LEADERSHIP

A. KIMBERLY ESPOSITO
Full Name (Last, First, Middle Initial)

Mailing Address 6416 AUTUMN GOLD CT.

City COLUMBIA	State MD	Zip Code 21045
------------------	-------------	-------------------

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

Name of Employer M&T Bank	Occupation Equipment Mgmt
------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2011

Transaction ID : SA11AI.4702

Amount of Each Receipt this Period

50.00

B. KIMBERLY ESPOSITO
Full Name (Last, First, Middle Initial)

Mailing Address 6416 AUTUMN GOLD CT.

City COLUMBIA	State MD	Zip Code 21045
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FEC ID number of contributing federal political committee. **C**

Name of Employer M&T Bank	Occupation Equipment Mgmt
------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2011

Transaction ID : SA11AI.4710

Amount of Each Receipt this Period

50.00

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

Mailing Address 6416 AUTUMN GOLD CT.

City COLUMBIA	State MD	Zip Code 21045
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FEC ID number of contributing federal political committee. **C**

Name of Employer M&T Bank	Occupation Equipment Mgmt
------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2011

Transaction ID : SA11AI.4670

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 8 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICANS FOR NEW LEADERSHIP

A. KIMBERLY ESPOSITO
Full Name (Last, First, Middle Initial)
Mailing Address 6416 AUTUMN GOLD CT.
City COLUMBIA State MD Zip Code 21045
FEC ID number of contributing federal political committee. **C**
Name of Employer M&T Bank Occupation Equipment Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **550.00**

Date of Receipt **11 / 21 / 2011**
Transaction ID : SA11AI.4676
Amount of Each Receipt this Period **50.00**

B. KIMBERLY ESPOSITO
Full Name (Last, First, Middle Initial)
Mailing Address 6416 AUTUMN GOLD CT.
City COLUMBIA State MD Zip Code 21045
FEC ID number of contributing federal political committee. **C**
Name of Employer M&T Bank Occupation Equipment Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **12 / 21 / 2011**
Transaction ID : SA11AI.4682
Amount of Each Receipt this Period **50.00**

C. John Firestone
Full Name (Last, First, Middle Initial)
Mailing Address 349 Fairfield Ave Suite E
City Gretna State LA Zip Code 70056
FEC ID number of contributing federal political committee. **C**
Name of Employer physician Occupation Physicians of River Ridge
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **09 / 05 / 2011**
Transaction ID : SA11AI.4865
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **200.00**
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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICANS FOR NEW LEADERSHIP

A. John Firestone
Full Name (Last, First, Middle Initial)

Mailing Address 349 Fairfield Ave
Suite E

City Gretna State LA Zip Code 70056

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

Name of Employer physician Occupation Physicians of River Ridge

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
10 / 05 / 2011
Transaction ID : SA11AI.4895

Amount of Each Receipt this Period
100.00

B. John Firestone
Full Name (Last, First, Middle Initial)

Mailing Address 349 Fairfield Ave
Suite E

City Gretna State LA Zip Code 70056

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

Name of Employer physician Occupation Physicians of River Ridge

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
11 / 05 / 2011
Transaction ID : SA11AI.4920

Amount of Each Receipt this Period
100.00

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

Mailing Address 349 Fairfield Ave
Suite E

City Gretna State LA Zip Code 70056

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

Name of Employer physician Occupation Physicians of River Ridge

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
12 / 05 / 2011
Transaction ID : SA11AI.4942

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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 10 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial) A. charles grentner		Date of Receipt MM / DD / YYYY 09 / 06 / 2011 Transaction ID : SA11AI.4707
Mailing Address 779 n shore dr		Amount of Each Receipt this Period 25.00
City miami beach	State Zip Code FL 33141	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 225.00
Name of Employer Self	Occupation Hospitality	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. charles grentner		Date of Receipt MM / DD / YYYY 10 / 06 / 2011 Transaction ID : SA11AI.4668
Mailing Address 779 n shore dr		Amount of Each Receipt this Period 25.00
City miami beach	State Zip Code FL 33141	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer Self	Occupation Hospitality	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. charles grentner		Date of Receipt MM / DD / YYYY 11 / 06 / 2011 Transaction ID : SA11AI.4674
Mailing Address 779 n shore dr		Amount of Each Receipt this Period 25.00
City miami beach	State Zip Code FL 33141	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 275.00
Name of Employer Self	Occupation Hospitality	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 11 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICANS FOR NEW LEADERSHIP

A. charles grentner
 Full Name (Last, First, Middle Initial)
 Mailing Address 779 n shore dr
 City miami beach State FL Zip Code 33141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Hospitality
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : SA11AI.4680
 Amount of Each Receipt this Period
 25.00

B. Joyce Hiltibrand
 Full Name (Last, First, Middle Initial)
 Mailing Address 12343 E. 39th St.
 City Tulsa State OK Zip Code 74146-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 04 / 2011
Transaction ID : SA11AI.4687
 Amount of Each Receipt this Period
 50.00

C. Joyce Hiltibrand
 Full Name (Last, First, Middle Initial)
 Mailing Address 12343 E. 39th St.
 City Tulsa State OK Zip Code 74146-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2011
Transaction ID : SA11AI.4697
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 OF 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICANS FOR NEW LEADERSHIP

A. Joyce Hiltibrand
 Full Name (Last, First, Middle Initial)
 Mailing Address 12343 E. 39th St.
 City State Zip Code
 Tulsa OK 74146-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 none Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2011
Transaction ID : SA11AI.4706
 Amount of Each Receipt this Period
 50.00

B. Joyce Hiltibrand
 Full Name (Last, First, Middle Initial)
 Mailing Address 12343 E. 39th St.
 City State Zip Code
 Tulsa OK 74146-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 none Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2011
Transaction ID : SA11AI.4667
 Amount of Each Receipt this Period
 50.00

C. Joyce Hiltibrand
 Full Name (Last, First, Middle Initial)
 Mailing Address 12343 E. 39th St.
 City State Zip Code
 Tulsa OK 74146-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 none Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2011
Transaction ID : SA11AI.4673
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 13 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICANS FOR NEW LEADERSHIP

A. Joyce Hiltibrand
Full Name (Last, First, Middle Initial)
Mailing Address 12343 E. 39th St.
City Tulsa State OK Zip Code 74146-3306
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 04 / 2011
Transaction ID : SA11AI.4679
Amount of Each Receipt this Period
50.00

B. Roberta Kahn
Full Name (Last, First, Middle Initial)
Mailing Address 20305 Stedmall Place
City Montgomery Village State MD Zip Code 20886
FEC ID number of contributing federal political committee. **C**
Name of Employer NIH Occupation doctor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2011
Transaction ID : SA11AI.4902
Amount of Each Receipt this Period
50.00

C. Roberta Kahn
Full Name (Last, First, Middle Initial)
Mailing Address 20305 Stedmall Place
City Montgomery Village State MD Zip Code 20886
FEC ID number of contributing federal political committee. **C**
Name of Employer NIH Occupation doctor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 05 / 2011
Transaction ID : SA11AI.4925
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	1300.00

**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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Online Contribution Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2011

Transaction ID : SB21B.4949

Amount of Each Disbursement this Period

304.87

Full Name (Last, First, Middle Initial)

B. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Online Contribution Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : SB21B.4951

Amount of Each Disbursement this Period

58.63

Full Name (Last, First, Middle Initial)

C. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Online Contribution Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.4952

Amount of Each Disbursement this Period

100.41

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

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

463.91

**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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Online Contribution Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.4953

Amount of Each Disbursement this Period

45.26

Full Name (Last, First, Middle Initial)

B. Chevron

Mailing Address 6001 Bollinger Canyon Rd

City San Ramon State CA Zip Code 94583

Purpose of Disbursement
Gas

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B.4645

Amount of Each Disbursement this Period

51.09

Full Name (Last, First, Middle Initial)

C. Kolesar & Leatham

Mailing Address 400 S Rampart Blvd Ste 400

City Las Vegas State NV Zip Code 89145

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2011

Transaction ID : SB21B.4958

Amount of Each Disbursement this Period

202.50

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

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

298.85

**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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Kolesar & Leatham

Mailing Address 400 S Rampart Blvd Ste 400

City Las Vegas State NV Zip Code 89145

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2011

Transaction ID : **SB21B.4956**

Amount of Each Disbursement this Period

205.70

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 401 W 15th St Suite 520

City Austin State TX Zip Code 78701

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2011

Transaction ID : **SB21B.4714**

Amount of Each Disbursement this Period

8.81

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 401 W 15th St Suite 520

City Austin State TX Zip Code 78701

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : **SB21B.4715**

Amount of Each Disbursement this Period

7.45

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

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

221.96

**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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 401 W 15th St
Suite 520

City Austin State TX Zip Code 78701

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4716

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Piryx, Inc.

Mailing Address 401 W 15th St
Suite 520

City Austin State TX Zip Code 78701

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4711

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Piryx, Inc.

Mailing Address 401 W 15th St
Suite 520

City Austin State TX Zip Code 78701

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4712

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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 401 W 15th St
Suite 520

City Austin State TX Zip Code 78701

Purpose of Disbursement
CC Processing

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
12			31			2011			

Transaction ID : SB21B.4713

Amount of Each Disbursement this Period

6.76

Full Name (Last, First, Middle Initial)

B. Pitney Bowes

Mailing Address 1 Elmcroft Rd

City Stamford State CT Zip Code 06926

Purpose of Disbursement
Office Equipment

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
07			22			2011			

Transaction ID : SB21B.4567

Amount of Each Disbursement this Period

105.00

Full Name (Last, First, Middle Initial)

C. Pitney Bowes

Mailing Address 1 Elmcroft Rd

City Stamford State CT Zip Code 06926

Purpose of Disbursement
Office Equipment

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
08			29			2011			

Transaction ID : SB21B.4580

Amount of Each Disbursement this Period

100.00

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

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

211.76

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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)

<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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Pitney Bowes

Mailing Address 1 Elmcroft Rd

City State Zip Code
Stamford CT 06926

Purpose of Disbursement
Office Equipment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
09 / 26 / 2011

Transaction ID : SB21B.4587

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Pitney Bowes

Mailing Address 1 Elmcroft Rd

City State Zip Code
Stamford CT 06926

Purpose of Disbursement
Office Equipment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
09 / 29 / 2011

Transaction ID : SB21B.4588

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Shell Oil Co.

Mailing Address 910 Louisiana St

City State Zip Code
Houston TX 77002

Purpose of Disbursement
Gas

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
11 / 07 / 2011

Transaction ID : SB21B.4624

Amount of Each Disbursement this Period

88.65

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

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

288.65

**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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Shell Oil Co.

Mailing Address 910 Louisiana St

City Houston State TX Zip Code 77002

Purpose of Disbursement
gas

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	06	/	2011

Transaction ID : SB21B.4648

Amount of Each Disbursement this Period

71.56

Full Name (Last, First, Middle Initial)

B. Templeton Plaza, LLC

Mailing Address 3235 S Rainbow Ste 101

City Las Vegas State NV Zip Code 89146

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	06	/	2011

Transaction ID : SB21B.4180

Amount of Each Disbursement this Period

550.00

Full Name (Last, First, Middle Initial)

C. Templeton Plaza, LLC

Mailing Address 3235 S Rainbow Ste 101

City Las Vegas State NV Zip Code 89146

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2011

Transaction ID : SB21B.4959

Amount of Each Disbursement this Period

500.00

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

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

1121.56

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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)

<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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Templeton Plaza, LLC

Mailing Address 3235 S Rainbow
Ste 101

City Las Vegas State NV Zip Code 89146

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2011

Transaction ID : SB21B.4960

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2011

Transaction ID : SB21B.4566

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2011

Transaction ID : SB21B.4568

Amount of Each Disbursement this Period

8.00

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

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

516.00

**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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : SB21B.4575

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Transaction ID : SB21B.4579

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2011

Transaction ID : SB21B.4591

Amount of Each Disbursement this Period

35.00

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

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

51.00

**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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2011

Transaction ID : SB21B.4586

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2011

Transaction ID : SB21B.4590

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2011

Transaction ID : SB21B.4592

Amount of Each Disbursement this Period

35.00

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

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

51.00

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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)

<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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2011

Transaction ID : SB21B.4597

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 18 / 2011

Transaction ID : SB21B.4603

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2011

Transaction ID : SB21B.4606

Amount of Each Disbursement this Period

35.00

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

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

105.00

**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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2011

Transaction ID : SB21B.4609

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2011

Transaction ID : SB21B.4612

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2011

Transaction ID : SB21B.4615

Amount of Each Disbursement this Period

35.00

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

105.00

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

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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)

<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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : SB21B.4618

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2011

Transaction ID : SB21B.4619

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2011

Transaction ID : SB21B.4620

Amount of Each Disbursement this Period

35.00

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

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

78.00

**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)
AMERICANS FOR NEW LEADERSHIP

Full Name (Last, First, Middle Initial)

A. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2011

Transaction ID : **SB21B.4644**

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2011

Transaction ID : **SB21B.4653**

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank, N.A.

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement
Bank Charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2011

Transaction ID : **SB21B.4664**

Amount of Each Disbursement this Period

8.00

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

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

51.00

3584.43
