

# 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.   
COALITION FOR AMERICAN VALUES PAC

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  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  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  10 / 01 / 2012 through  11 / 26 / 2012

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

Type or Print Name of Treasurer Brent Downs

Signature of Treasurer Brent Downs [Electronically Filed] Date  04 / 23 / 2014

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**COALITION FOR AMERICAN VALUES PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="55497.66"/>	<input type="text" value="55497.66"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="25975.59"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="19588.00"/>	<input type="text" value="69721.12"/>
(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="45563.59"/>	<input type="text" value="125218.78"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30183.96"/>	<input type="text" value="109839.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="15379.63"/>	<input type="text" value="15379.63"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

**COALITION FOR AMERICAN VALUES PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1250.00	4375.00
(ii) Unitemized .....	18338.00	65346.12
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	19588.00	69721.12
(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) .....	19588.00	69721.12
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 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))..... ▶	19588.00	69721.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19588.00	69721.12

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	9.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	9.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	192.00
(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	192.00
29. Other Disbursements .....	30183.96	109637.25
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)) ..	30183.96	109839.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30183.96	109839.15

**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) .....	19588.00	69721.12
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	192.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19588.00	69529.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	9.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	9.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 18
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**COALITION FOR AMERICAN VALUES PAC**

**A. David De Prisco**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 Mitchell Circle

City Wheaton State IL Zip Code 60189

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

Name of Employer NA Occupation NA

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  
 11 / 02 / 2012

**Transaction ID : SA11AI.4381**

Amount of Each Receipt this Period  
 200.00

**B. Ron McKenna**  
Full Name (Last, First, Middle Initial)

Mailing Address 5770 Harborage Drive

City Fort Myers State FL Zip Code 33908

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

Name of Employer Retired 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  
 10 / 25 / 2012

**Transaction ID : SA11AI.4379**

Amount of Each Receipt this Period  
 350.00

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

Mailing Address HC 34 Box 115

City Las Vegas State NM Zip Code 87701

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

Name of Employer Self Employed Occupation Self Employed

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 / 16 / 2012

**Transaction ID : SA11AI.4395**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00

**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 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

**A.** Full Name (Last, First, Middle Initial)  
Vernon O Taylor II

Mailing Address 2301 W Mosley Loop

City Alpine State TX Zip Code 79830

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Consultant Offshore Logistics

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  
10 / 19 / 2012

Transaction ID : SA11AI.4377

Amount of Each Receipt this Period  
200.00

**B.** 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  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1250.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Now!**

Mailing Address 1126 South 70th Street  
Suite S420

City Milwaukee State WI Zip Code 53214

Purpose of Disbursement  
Fundraising/Caging Expenses

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 05 / 2012

Transaction ID : SB29.4343

Amount of Each Disbursement this Period

3525.00

Full Name (Last, First, Middle Initial)

**B. Campaign Now!**

Mailing Address 1126 South 70th Street  
Suite S420

City Milwaukee State WI Zip Code 53214

Purpose of Disbursement  
Fundraising/Caging Expenses

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 05 / 2012

Transaction ID : SB29.4345

Amount of Each Disbursement this Period

13935.06

Full Name (Last, First, Middle Initial)

**C. Campaign Now!**

Mailing Address 1126 South 70th Street  
Suite S420

City Milwaukee State WI Zip Code 53214

Purpose of Disbursement  
Telefundraising Fees

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2012

Transaction ID : SB29.4370

Amount of Each Disbursement this Period

8455.00

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

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

25915.06



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. Campaign Now!**

Mailing Address 1126 South 70th Street  
Suite S420

City Milwaukee State WI Zip Code 53214

Purpose of Disbursement  
Direct Mail

003

Candidate Name

Category/  
Type

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 Y  
11 / 20 / 2012

Transaction ID : SB29.4372

Amount of Each Disbursement this Period

2722.70

Full Name (Last, First, Middle Initial)

**B. Campaign Now!**

Mailing Address 1126 South 70th Street  
Suite S420

City Milwaukee State WI Zip Code 53214

Purpose of Disbursement  
Direct Mail Supplies

003

Candidate Name

Category/  
Type

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 Y  
11 / 20 / 2012

Transaction ID : SB29.4374

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

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 Y  
10 / 01 / 2012

Transaction ID : SB29.4337

Amount of Each Disbursement this Period

13.07

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

3035.77

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

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 Y  
10 / 02 / 2012

Transaction ID : SB29.4338

Amount of Each Disbursement this Period

14.88

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

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 Y  
10 / 03 / 2012

Transaction ID : SB29.4339

Amount of Each Disbursement this Period

9.90

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

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 Y  
10 / 09 / 2012

Transaction ID : SB29.4340

Amount of Each Disbursement this Period

13.86

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

38.64

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 12 / 2012

Transaction ID : SB29.4341

Amount of Each Disbursement this Period

9.49

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 15 / 2012

Transaction ID : SB29.4346

Amount of Each Disbursement this Period

0.83

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 16 / 2012

Transaction ID : SB29.4347

Amount of Each Disbursement this Period

0.55

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

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

10.87

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

Transaction ID : SB29.4348

Amount of Each Disbursement this Period

77.49

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2012

Transaction ID : SB29.4354

Amount of Each Disbursement this Period

9.00

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 22 / 2012

Transaction ID : SB29.4355

Amount of Each Disbursement this Period

30.63

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

117.12

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 23 / 2012

Transaction ID : SB29.4356

Amount of Each Disbursement this Period

32.88

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2012

Transaction ID : SB29.4357

Amount of Each Disbursement this Period

23.00

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2012

Transaction ID : SB29.4358

Amount of Each Disbursement this Period

36.80

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

92.68

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2012

Transaction ID : SB29.4359

Amount of Each Disbursement this Period

12.02

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

Transaction ID : SB29.4360

Amount of Each Disbursement this Period

4.41

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

Transaction ID : SB29.4361

Amount of Each Disbursement this Period

10.91

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

27.34

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2012

Transaction ID : SB29.4362

Amount of Each Disbursement this Period

36.58

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 05 / 2012

Transaction ID : SB29.4363

Amount of Each Disbursement this Period

1.38

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 07 / 2012

Transaction ID : SB29.4364

Amount of Each Disbursement this Period

0.55

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

38.51

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 08 / 2012

Transaction ID : SB29.4365

Amount of Each Disbursement this Period

5.50

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2012

Transaction ID : SB29.4366

Amount of Each Disbursement this Period

1.38

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2012

Transaction ID : SB29.4367

Amount of Each Disbursement this Period

1.10

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

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

7.98



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 15 / 2012

Transaction ID : SB29.4368

Amount of Each Disbursement this Period

1.65

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.  
1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Processing

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 26 / 2012

Transaction ID : SB29.4369

Amount of Each Disbursement this Period

8.34

Full Name (Last, First, Middle Initial)

**C. US Postal Service**

Mailing Address 235 N. Glebe Rd

City Arlington State VA Zip Code 22203

Purpose of Disbursement  
Mail Services

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2012

Transaction ID : SB29.4342

Amount of Each Disbursement this Period

190.00

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

199.99

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COALITION FOR AMERICAN VALUES PAC**

Full Name (Last, First, Middle Initial)

**A. US Postal Service**

Mailing Address 235 N. Glebe Rd

City Arlington State VA Zip Code 22203

Purpose of Disbursement  
Mail Services

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2012

Transaction ID : SB29.4344

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. US Postal Service**

Mailing Address 235 N. Glebe Rd

City Arlington State VA Zip Code 22203

Purpose of Disbursement  
Mail Services

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

Transaction ID : SB29.4371

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

700.00

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

30183.96