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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

Combat Veterans For Congress PAC

ADDRESS (number and street) 1925 Century Park East, Suite 2120

Check if different than previously reported. (ACC)

Los Angeles CA 90067

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00469239

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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on MM / DD / YYYY in the State of

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on MM / DD / YYYY in the State of

5. Covering Period 01 / 01 / 2010 through 03 / 31 / 2010

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

Type or Print Name of Treasurer F. Michael Curry

Signature of Treasurer F. Michael Curry Date 04 / 05 / 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									
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FEC FORM 3X
Rev. 12/2004

10030291796

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

COMBAT VETERANS FOR CONGRESS PAC

Report Covering the Period:

From:

01 ' 01 ' 2010

To:

03 ' 31 ' 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2010		1,625.00
(b) Cash on Hand at Beginning of Reporting Period.....	1,625.00	
(c) Total Receipts (from Line 19)	31,949.00	31,949.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	33,574.00	33,574.00
7. Total Disbursements (from Line 31).....	23,600. —	23,600. —
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	9,974. —	9,974.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	00. —	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

10030291797

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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).....

31,949.00

(ii) Unitemized.....

-

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

31,949.00

(b) Political Party Committees.....

-

(c) Other Political Committees (such as PACs).....

-

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

31,949.00

12. Transfers From Affiliated/Other Party Committees.....

00 -

13. All Loans Received.....

00 -

14. Loan Repayments Received.....

00 -

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

00 -

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

00 -

17. Other Federal Receipts (Dividends, Interest, etc.).....

60 -

18. Transfers from Non-Federal and Levin Funds
(a) Non-Federal Account (from Schedule H3).....

00 -

(b) Levin Funds (from Schedule H5).....

00 -

(c) Total Transfers (add 18(a) and 18(b))..

00 -

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

31,949.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

31,949.00

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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	23,600 -	
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
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))..	23,600 -	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23,600 -	

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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)	31,949.00	
34. Total Contribution Refunds (from Line 28(d))	00 -	
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31,949. -	
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	23,600 -	
37. Offsets to Operating Expenditures (from Line 15, page 3)	- -	
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23,600 -	

10030291800

See Attached

**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	OF
<input 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)

A.

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

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

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

Amount of Each Receipt this Period

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

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

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Schedule A

Combat Veterans For Congress

Donor's List

Name	Address	Amount	Date	Aggregate Totals
Stanton Lore	128 Woodshore Ct. Columbia, SC. 29223	\$25	Nov. 2009	\$25
Joseph R. John	264 S. La Cienega Blvd, Ste 186 Beverly Hills, CA 90211	\$500	Dec. 2009	\$500
Michael Curry	1925 Century Park East, Suite 2120 Los Angeles, CA 90067	\$500	Dec.2009	\$500
Paul Carter	400 OceanGate, Suite 800 Long Beach, CA 90802	\$500	Dec. 2009	\$500
Richard Fender	102 Mountain View Lane Radford, VA 24141 texutman@yahoo.com	\$100	Dec. 2009	\$100
Totals 4th Quarter Perind Ending 12.31.2009		\$1,625		
Nancy Eisenhart	5982 Ellenview Ave. Woodland Hills, CA 91367	\$100	Jan.2010	\$100
Stephan Shatynski	678 E. Lennox Ct Brea, CA 92821 714-256-2002	\$500	Jan. 2010	\$500
Michael Kazanjian	126 Groverton PL LA, CA 90077	\$500	Jan. 2010	\$500
William Russell For Congress	P.O. Box 630 Johnstown, PA 15907 814-254-4475	\$1,000	Jan.2010	\$1,000
Cdr. T L Cohen	2650 Annandale Tustin, CA 92782	\$500	Jan. 2010	\$500
Frank Drdek	9021 Sundance Ct. San Diego, CA 92129	\$500	Jan. 2010	\$500

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Timothy R. Penalka Anne Marie Penalka	1111 West Walnut Ave. San Diego, CA 92103	\$500	Jan.2010	\$500
Harry R. Bigham Janet Olson-Bigham	1111 W. Quince St. San Diego, CA 92103 619-234-9090	\$500	Jan.2010	\$500
Phillip Kazanjian	520 E. Wilson Ave. Suite 250 Glendale, CA 91206	\$500	Feb.2010	\$500
Paul Ryan Minasian	PO Box 1679 Oroville, CA 95965	\$500	Feb.2010	\$500
Daniel Snee	HollyMolly Press 410 Palisades Ave Santa Monica,CA 90402 310-393-1370 dan@hollymollypress.com	\$25	Feb.2010	\$25
Joseph R. John		\$35	Feb.2010	\$535
Frank Drdek		\$105	Feb.2010	\$605
Jody Mortarotti	6701 Andasol Ave Lake Balboa, CA 91406	\$35	Feb.2010	\$35
Nancy Eisenhart	brunch for nancy robert E. Ann Hanna	\$105	Feb.2010	\$205
Maureen Johnson	PO Box 5306 Playa del Rey, CA 90293 310-822-2456	\$35	Feb.2010	\$35
Irma M Waldo	62 Pill Hill Rd Hillsdale 12529 NY	\$50	Feb.2010	\$50
Willie Vaden Wendy Herman	Willie Vaden4Congress PO box 103887 Corpus Christi TX 361-533-1614 vpcargocc@sbcglobal.net	\$2,000 \$100	Feb.2010 (value of \$20 gold pier	\$3,600
George Wagner	12326 Fairway Point Row	\$100	Feb.2010	\$100

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Sarah Wagner	SD. CA 92128			
Nann L. Lee Warren S. Lee	70 Charles Wanzel Rd Copake, NY 12516	\$25	Feb.2010	\$25
Rob Simmons	Congressman PO Box 268 Stonington, CT 06378	\$100	Feb.2010	\$100
Jack M. Brown Bonnie L. Brown	5523 Whitehall St. Midland, MI 48642 989-835-1858	\$100	Fe.2010	\$100
Leesa D. Phillips		\$35	Feb.2010	\$35
John H Nunn Maureen Nunn	1 Crest Rd. West Rolling Hills, CA 90274 <u>John_Nunn@cox.net</u>	\$2,000	Feb.2010	\$2,000
Doris Schwartz	Schwartz & Assoc. Inc 110 W. C Street Suite 1300 SD, CA 92101 616-645-5212 <u>dschwartz@schwartzcorp.com</u>	\$1,000	Feb.2010	\$1,000
Jerry D. McMorris mary K. McMorris	PO Box 216 Timnath CO 80547 970-684-4441	\$2,000 \$450	Mar.2010	\$2,450
Dan Carasso Ida F Carasso	7856 Ranchito Ave Panorama City CA 91402 818-786-1456	\$2,000	Mar.2010	\$2,000
Cmdr William Ise Nancy Ise	1600 Santiago Dr Newport Beach CA 92660 949-722-9590	\$100	Mar.2010	\$100
Daniel Genter Jr. Susan Genter	1435 Stone Canyon Rd Bel Air, CA 90077 310-477-6543	\$1,000	Mar.2010	\$1,000
Robert Hamer Deborah Hamer	10287 Spruce Woodland Way Escondido, CA 92026 310-801-0083 <u>bob@bobhamer.net</u>	\$100	Mar.2010	\$100
William T Mobley Jr	3476 Habersham Rd NW	\$200	Mar.2010	\$200

Atlanta, Georgia 30305

Frederick Zydec Elizabeth Zydec	451 Lafitte Rd. Little Torch Key, Fl. 33042 305-872-5735	\$100	Mar.2010	\$100
Philip J. Ise	PO Box 4543 Westlake Village, CA 91359	\$250	Mar.2010	\$250
Joseph John		\$50	Mar.2010	\$585
Lee D.Foss Susan B Selk POA	309 Bishop Ave. La Porte City, IA 50651 319-342-3283	\$25	Mar.2010	\$25
Richard O. Caselli DDS Trustee of the Richard Caselli Trust of 1992	19329 Orange Ave. Sonoma CA 95476	\$25	Mar.2010	\$25
John F Galligan	410 Benedict Ave. Tarrytown, NY 10591	\$25	Mar.2010	\$25
Laura J. Smyser	1618 Tilden Ave. Fort Wayne, IN 46805	\$20	Mar.2010	\$20
Dick Van Patten Pat Van Patten	13920 Magnolia Blvd. Sherman Oaks,CA 91423	\$300	Mar.2010	\$300
Joseph John	Feb. Fundraiser	\$3,400	Feb.2010	\$3,985
Reverge Anselmo	in kind donation (wine)	\$1,000	Feb.2010	\$1,000
Michael Kazanjian	in kind donation (jewelry)	\$8,300	Feb.2010	\$8,800
John P. Souza IV	in kind donation (painting)	\$100	Feb.2010	\$100
Joel Arends	in kind donations - travel	\$804		
In kind donations				\$10,204
Totals First Quarter Ending 3.31.2010		\$31,199		
Less In kind donations		\$10,204		
Subtotal Donations		\$20,995		
Plus Website Donations - 1st Qtr		\$750		
Total Cash Receipts 1st Qtr		\$21,745		

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Website Contributions

NAME	ADDRESS	AMOUNT	DATE
Frank Hake	4931 Bonita Bay Blvd. Bonita Springs FL 34134 <u>FHAKE@COMCAST>net</u>	\$500.00	Mar.30.2010
Jeroldine Short	3310 Berry Ave. Kingman,AZ 86401 <u>bzylady@frontier.net</u>	\$250.00	Mar.30.2010
Totals - First Quarter Ending 3.31.2010		\$750.00	

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See Attached

**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 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)

A.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

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

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

10030291807

Schedule B

Expenses

DATE	Entity	Amount	Purpose
Feb.2.2010	Bieber Communications 3609 W MacArthur Blvd. Ste 812 Santa Ana, CA 92704 714-210-3630	\$3,430.63	printed invitations Feb. fundraiser
Jan.22.2010	Tommy Cook	\$234.00	reimbursement for mailings and stationary
Jan. 22.2010	Deborah Johns	\$332.40	reimbursement for travel expenses
Feb.26.2010	Monrose Catering & Smart Party Rents 31117 Via Colinas, Suite 403 Westlake Village, CA 91362 818-707-7307	\$5,907.86	Feb. fundraiser
Feb.26.2010	American Advanced Parking Services - v Valet Pkg 1020 N Doheny Dr #6 LA,CA 90069 310-276-1725	\$800	Fe, fundraiser valet parking
Feb.26.2010	Erik Ekstrand PO Box 11033 Glendale,CA 91226 323-258-5141	\$600	music - fundraiser
March1.2010	Mitch Carter Ins.Agency GJ Sullivan Co 625 The City Drive Suite 400 Orange,CA 92868 714-621-2329	\$619.50	liability insurance Feb. fundraiser
March17.2010	Excalibur Group 1140 Highland Ave, Ste 250 Manhattan Beach,CA 90266 310-533-1925	\$1,000	website conslting & design

10030291808

March 17.2010	Deborah Johns	\$472	travel expenses to func
Totals 1st Quarter Ending 3.31.2010		\$13,396	

April 5.2010	Proritical LLC	\$2,800	website consulting and
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10030291809

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full)
Combat Veterans for Congress PAC

LOAN SOURCE Full Name (Last, First, Middle Initial)
None

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period

TERMS

Date Incurred: MM / DD / YYYY
 Date Due: MM / DD / YYYY
 Interest Rate: % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

10030291810

SCHEDULE C-1 (FEC Form 3X)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
 Information found on
 Page _____ of Schedule C

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER C	
LENDING INSTITUTION (LENDER) Full Name: <i>N/A</i>		Amount of Loan	Interest Rate (APR)
Mailing Address		Date Incurred or Established	
City	State Zip Code	Date Due	
A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes		If yes, date originally incurred	
B. If line of credit, Amount of this Draw:		Total Outstanding Balance:	
C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the value of this collateral? _____ Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? _____	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: _____		Location of account: Address: City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE	
Title			

10030291811

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
COMBAT VETERANS FOR CONGRESS PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>NONE</i>	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

10030291812

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼ C
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee <i>N/A</i>	Date M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure:	
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee	Date M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure:	
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date M M / D D / Y Y Y Y

10030291813

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))
 (To be used only by Political Committees in the General Election)

PAGE	OF
FOR LINE 25 OF FORM 3X	

NAME OF COMMITTEE (In Full)	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, name the designating committee:	Full Name of Subordinate Committee
	Mailing Address
	City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee	Purpose of Expenditure	Category/Type
Mailing Address	Date	
City State Zip Code	Amount	
Name of Federal Candidate Supported Office Sought: House State: Senate District: Presidential	Aggregate General Election Expenditure for this Candidate ▶	
Full Name (Last, First, Middle Initial) of Each Payee	Purpose of Expenditure	Category/Type
Mailing Address	Date	
City State Zip Code	Amount	
Name of Federal Candidate Supported Office Sought: House State: Senate District: Presidential	Aggregate General Election Expenditure for this Candidate ▶	
Full Name (Last, First, Middle Initial) of Each Payee	Purpose of Expenditure	Category/Type
Mailing Address	Date	
City State Zip Code	Amount	
Name of Federal Candidate Supported Office Sought: House State: Senate District: Presidential	Aggregate General Election Expenditure for this Candidate ▶	

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

10030291814

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)**
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)**

NAME OF COMMITTEE (In Full)

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check
or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

10030291815

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

NAME OF COMMITTEE (In Full)
COMBAT VETERANS FOR CONGRESS PAC

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.

II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % 100 %	NONFEDERAL % %
ACTIVITY OR EVENT IDENTIFIER <hr/> ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % %	NONFEDERAL % %
ACTIVITY OR EVENT IDENTIFIER <hr/> ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % %	NONFEDERAL % %
ACTIVITY OR EVENT IDENTIFIER <hr/> ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % %	NONFEDERAL % %
ACTIVITY OR EVENT IDENTIFIER <hr/> ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % %	NONFEDERAL % %
ACTIVITY OR EVENT IDENTIFIER <hr/> ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % %	NONFEDERAL % %

10030291816

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
4/9/10

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): Shipping Date
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

ER
PREPARER
(3/2005)

4/15/10
DATE PREPARED

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