

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 HUCK PAC

ADDRESS (number and street) PO BOX 2008 LITTLE ROCK AR 72203

2. FEC IDENTIFICATION NUMBER C C00448373 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

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 Bryan Jeffrey

Signature of Treasurer Bryan Jeffrey [Electronically Filed] Date 12 / 06 / 2012

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

**HUCK 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"/>		95793.74
(b) Cash on Hand at Beginning of Reporting Period.....	164969.48	
(c) Total Receipts (from Line 19) .....	159249.49	580373.08
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	324218.97	676166.82
7. Total Disbursements (from Line 31).....	65052.84	417000.69
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	259166.13	259166.13
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**HUCK PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2012 To: M M / D D / Y Y Y Y 11 / 26 / 2012

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).....	115348.00	327228.00
(ii) Unitemized .....	30401.49	228865.08
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	145749.49	556093.08
(b) Political Party Committees .....	7000.00	12000.00
(c) Other Political Committees (such as PACs).....	6500.00	11500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	159249.49	579593.08
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	780.00
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))..... ▶	159249.49	580373.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	159249.49	580373.08

**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 .....	64672.84	368615.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	64672.84	368615.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	42000.00
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 .....	380.00	1385.00
(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)).....	380.00	1385.00
29. Other Disbursements .....	0.00	5000.00
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)) ..	65052.84	417000.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65052.84	417000.69

**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) .....	159249.49	579593.08
34. Total Contribution Refunds (from Line 28(d)) .....	380.00	1385.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	158869.49	578208.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	64672.84	368615.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	780.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	64672.84	367835.69

**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 85
	<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	

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)  
**HUCK PAC**

**A. Kenneth Abramowitz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 958  
 City Southport State CT Zip Code 06890  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NGN Capital Occupation Analyst  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 10 / 2012  
**Transaction ID : SA11AI.61799**  
 Amount of Each Receipt this Period  
**2500.00**

**B. Julie R Adams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 213 S Lyndon Lane  
 City Louisville State KY Zip Code 40222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer City of Louisville Occupation Council Member  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 12 / 2012  
**Transaction ID : SA11AI.61299**  
 Amount of Each Receipt this Period  
**500.00**

**C. Mike Akin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2122 Highway 35 W  
 City Monticello State AR Zip Code 71655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Akin Industries, Inc. Occupation Owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 30 / 2012  
**Transaction ID : SA11AI.61365**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4000.00</b>
<b>TOTAL</b> 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 85
	<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)  
**HUCK PAC**

**A. Mark H Allison**  
Full Name (Last, First, Middle Initial)

Mailing Address 39 Masters Place Drive

City State Zip Code  
Maumelle AR 72113

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

Name of Employer Occupation  
Dover Dixon Horne Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 30 / 2012  
**Transaction ID : SA11AI.61369**

Amount of Each Receipt this Period  
2000.00

**B. Basil Bacon**  
Full Name (Last, First, Middle Initial)

Mailing Address 4420 N Farm Road 197

City State Zip Code  
Springfield MO 65803

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

Name of Employer Occupation  
Requested using best efforts Requested using best efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 30 / 2012  
**Transaction ID : SA11AI.62776**

Amount of Each Receipt this Period  
50.00

**c. Lara Sue Baggett**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1767

City State Zip Code  
Ozona TX 76943

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2012  
**Transaction ID : SA11AI.62695**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2550.00
<b>TOTAL</b> 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 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Juliana Barlow</b>		Date of Receipt
Mailing Address 136 Lariat Lane		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Marble Falls	State TX	Zip Code 78654
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.61772</b>
Name of Employer Retired		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="350.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Juliana Barlow</b>		Date of Receipt
Mailing Address 136 Lariat Lane		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Marble Falls	State TX	Zip Code 78654
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.62704</b>
Name of Employer Retired		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="375.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Juliana Barlow</b>		Date of Receipt
Mailing Address 136 Lariat Lane		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Marble Falls	State TX	Zip Code 78654
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.63376</b>
Name of Employer Retired		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="400.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 85
	<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)  
**HUCK PAC**

**A. Juliana Barlow**  
Full Name (Last, First, Middle Initial)

Mailing Address 136 Lariat Lane

City Marble Falls State TX Zip Code 78654

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 ▼ 425.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2012

**Transaction ID : SA11AI.63482**

Amount of Each Receipt this Period  
 25.00

**B. Jonathan Barnett**  
Full Name (Last, First, Middle Initial)

Mailing Address 1980 Highway 412 W

City Siloam Springs State AR Zip Code 72761

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

Name of Employer Self-Employed Occupation Contractor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : SA11AI.61363**

Amount of Each Receipt this Period  
 1000.00

**C. Norma Beauchamp**  
Full Name (Last, First, Middle Initial)

Mailing Address 78 Ventura Lane

City Aiken State SC Zip Code 29805

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 ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : SA11AI.62031**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1075.00
<b>TOTAL</b> 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 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Mary Beck</b>		Date of Receipt
Mailing Address 2324 Garland		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City	State	Zip Code
Texarkana	AR	71854
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.62414</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Requested using best efforts	Requested using best efforts	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Terrell E Benham</b>		Date of Receipt
Mailing Address 2601 Garden Bend Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Benton	AR	72015
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.61378</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
Impact Management Group	Executive	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Vicky Birmingham</b>		Date of Receipt
Mailing Address 125 Audrey Drive		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2012"/>
City	State	Zip Code
Keller	TX	76248
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.61762</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Requested using best efforts	Requested using best efforts	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1100.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 85
	<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)  
**HUCK PAC**

**A. Freddie Black**  
Full Name (Last, First, Middle Initial)

Mailing Address 2247 N Lakeshore Drive

City Lake Village State AR Zip Code 71653

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

Name of Employer Simmons First Occupation Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : SA11AI.61390**

Amount of Each Receipt this Period  
 250.00

**B. Robert H Book**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Kelby Street  
15th Floor

City Fort Lee State NJ Zip Code 07024

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

Name of Employer Requested using best efforts Occupation Requested using best efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : SA11AI.61328**

Amount of Each Receipt this Period  
 5000.00

**C. Scott M Book**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Kelby Street  
15th Floor

City Fort Lee State NJ Zip Code 07024

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

Name of Employer Requested using best efforts Occupation Requested using best efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2012

**Transaction ID : SA11AI.61326**

Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10250.00

**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 12 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Kelly Boyd</b>		Date of Receipt
Mailing Address Post Office Box 62		M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2012
City	State	Zip Code
Havana	AR	72842
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.61374</b>
C		Amount of Each Receipt this Period
		2000.00
Name of Employer	Occupation	
State of Arkansas, Secretary of State	Director of Governmental Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2025.00	

Full Name (Last, First, Middle Initial) <b>B. Hunter Brannon</b>		Date of Receipt
Mailing Address 1945 Nottingham Drive		M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2012
City	State	Zip Code
Southaven	MS	38671
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.61488</b>
C		Amount of Each Receipt this Period
		200.00
Name of Employer	Occupation	
Requested using best efforts	Requested using best efforts	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	300.00	

Full Name (Last, First, Middle Initial) <b>C. Jacqueline Britton</b>		Date of Receipt
Mailing Address 3318 Shallowford Circle		M M M / D D D / Y Y Y Y Y Y 10 / 04 / 2012
City	State	Zip Code
Birmingham	AL	35216
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.61687</b>
C		Amount of Each Receipt this Period
		25.00
Name of Employer	Occupation	
Metro Church of God	Graphic Designer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2225.00
<b>TOTAL</b> 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 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Jacqueline Britton</b>		Date of Receipt
Mailing Address 3318 Shallowford Circle		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City	State	Zip Code
Birmingham	AL	35216
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.63331</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Metro Church of God	Graphic Designer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. James Brubaker</b>		Date of Receipt
Mailing Address 1502 Esbenshade Road		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City	State	Zip Code
Lancaster	PA	17601
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.61672</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Ambassadors for Christ, Inc.	Minister	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. James Brubaker</b>		Date of Receipt
Mailing Address 1502 Esbenshade Road		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City	State	Zip Code
Lancaster	PA	17601
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.63332</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
Ambassadors for Christ, Inc.	Minister	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 14 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

**A. Marta Buser**  
Full Name (Last, First, Middle Initial)  
Mailing Address 13133 Reeds St  
City Overland Park State KS Zip Code 66209  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Gastrointestinal Associates PA Occupation Registered Nurse  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **350.00**

Date of Receipt **11 / 01 / 2012**  
**Transaction ID : SA11AI.63093**  
Amount of Each Receipt this Period **100.00**

**B. Jack Buzbee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 200 E. Douglas Street  
City De Soto State IL Zip Code 62924  
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 **300.00**

Date of Receipt **10 / 16 / 2012**  
**Transaction ID : SA11AI.61943**  
Amount of Each Receipt this Period **100.00**

**C. Randall L Bynum**  
Full Name (Last, First, Middle Initial)  
Mailing Address 124 W Capitol Avenue Suite 724  
City Little Rock State AR Zip Code 72201  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Requested using best efforts Occupation Requested using best efforts  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **2000.00**

Date of Receipt **10 / 26 / 2012**  
**Transaction ID : SA11AI.61345**  
Amount of Each Receipt this Period **2000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **2200.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 85
	(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

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

**A. Timothy Carney**  
Full Name (Last, First, Middle Initial)

Mailing Address 2945 Olivia Heights Avenue

City Henderson State NV Zip Code 89052

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 ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2012  
**Transaction ID : SA11AI.61886**

Amount of Each Receipt this Period  
 200.00

**B. Philip Cavender**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 1579

City Murfreesboro State TN Zip Code 37133

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

Name of Employer The Cavender Financial Group, Inc. Occupation Founder and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4443.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2012  
**Transaction ID : SA11AI.62440**

Amount of Each Receipt this Period  
 4443.00

**C. Trisha Chilcutt**  
Full Name (Last, First, Middle Initial)

Mailing Address 7887 Broadway Street

City San Antonio State TX Zip Code 78209

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

Name of Employer Self-Employed Occupation Property Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2012  
**Transaction ID : SA11AI.62631**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4743.00

**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 16 OF 85
	<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)  
**HUCK PAC**

**A. Harold Christopher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20420 Marine Drive  
 Apt H1  
 City Stanwood State WA Zip Code 98292  
 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 ▼ 825.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2012  
**Transaction ID : SA11AI.61740**  
 Amount of Each Receipt this Period  
 100.00

**B. Sherry Clarke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 146 Wildwood Trail  
 City Florence State AL Zip Code 35630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2012  
**Transaction ID : SA11AI.62750**  
 Amount of Each Receipt this Period  
 500.00

**C. Joshua Clinard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 15294  
 City Norfolk State VA Zip Code 23511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Navy Occupation Quarter Master  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012  
**Transaction ID : SA11AI.62708**  
 Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<b>TOTAL</b> 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 17 OF 85
	<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)  
**HUCK PAC**

**A. Joshua Clinard**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 15294

City Norfolk State VA Zip Code 23511

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

Name of Employer U.S. Navy Occupation Quarter Master

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 26 / 2012**

**Transaction ID : SA11AI.63489**

Amount of Each Receipt this Period  
**75.00**

**B. Joe Contarino**  
Full Name (Last, First, Middle Initial)

Mailing Address 8326 Mill Race Drive

City Ooltewah State TN Zip Code 37363

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 16 / 2012**

**Transaction ID : SA11AI.62017**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 23 London Lane

City Endicott State NY Zip Code 13760

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

Name of Employer Self-Employed Occupation Insurance agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **232.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 22 / 2012**

**Transaction ID : SA11AI.62439**

Amount of Each Receipt this Period  
**25.00**

**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 18 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

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

Mailing Address 23 London Lane

City Endicott State NY Zip Code 13760

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

Name of Employer Self-Employed Occupation Insurance agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 257.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : SA11AI.63143**

Amount of Each Receipt this Period  
 25.00

**B. Alfonse M D'Amato**  
Full Name (Last, First, Middle Initial)

Mailing Address 101 Park Avenue Suite 2506

City New York State NY Zip Code 10178

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

Name of Employer Park Strategies Occupation Government Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : SA11AI.61384**

Amount of Each Receipt this Period  
 5000.00

**C. Gerard Delorme**  
Full Name (Last, First, Middle Initial)

Mailing Address 13841 Long Ridge Drive

City Hagerstown State MD Zip Code 21742

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

Name of Employer YRC Occupation Truck Driver

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  
 10 / 09 / 2012

**Transaction ID : SA11AI.61776**

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5050.00
<b>TOTAL</b> 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 19 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

**A. Gerard Delorme**  
Full Name (Last, First, Middle Initial)  
Mailing Address 13841 Long Ridge Drive  
City Hagerstown State MD Zip Code 21742  
FEC ID number of contributing federal political committee. **C**  
Name of Employer YRC Occupation Truck Driver  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **425.00**

Date of Receipt **10 / 18 / 2012**  
**Transaction ID : SA11AI.62079**  
Amount of Each Receipt this Period **25.00**

**B. Bob M DeWeese M.D.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6206 Glenn Hill Road  
City Louisville State KY Zip Code 40222  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Physician  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1000.00**

Date of Receipt **10 / 12 / 2012**  
**Transaction ID : SA11AI.61301**  
Amount of Each Receipt this Period **1000.00**

**C. Gladys Deyns**  
Full Name (Last, First, Middle Initial)  
Mailing Address 24 Dewey Place  
City Lindenhurst State NY Zip Code 11757  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Nassau Health Care Corporation Occupation Administrative Assistant, Pediatrics  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1325.00**

Date of Receipt **10 / 09 / 2012**  
**Transaction ID : SA11AI.61790**  
Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1125.00**  
**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 20 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Patsy Drager</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2012 <b>Transaction ID : SA11AI.61616</b>
Mailing Address P.O. Box 1278		Amount of Each Receipt this Period 25.00
City Mena	State AR	Zip Code 71953
FEC ID number of contributing federal political committee. C		
Name of Employer Drager Industries, Inc.	Occupation Clerical	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B. Patsy Drager</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2012 <b>Transaction ID : SA11AI.62786</b>
Mailing Address P.O. Box 1278		Amount of Each Receipt this Period 10.00
City Mena	State AR	Zip Code 71953
FEC ID number of contributing federal political committee. C		
Name of Employer Drager Industries, Inc.	Occupation Clerical	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) <b>C. Patsy Drager</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2012 <b>Transaction ID : SA11AI.63203</b>
Mailing Address P.O. Box 1278		Amount of Each Receipt this Period 25.00
City Mena	State AR	Zip Code 71953
FEC ID number of contributing federal political committee. C		
Name of Employer Drager Industries, Inc.	Occupation Clerical	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 21 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. George Dunklin</b>		Date of Receipt
Mailing Address 1895 Highway 152		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>
City Humphrey	State AR	Zip Code 72073
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.63073</b>
Name of Employer Five Oaks Duck Lodge		Amount of Each Receipt this Period
Occupation Owner		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Durward Dupre</b>		Date of Receipt
Mailing Address 3929 Dove Creek Lane		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Plano	State TX	Zip Code 75093
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.63153</b>
Name of Employer Retired		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1157.00"/>	

Full Name (Last, First, Middle Initial) <b>C. James Eckford</b>		Date of Receipt
Mailing Address 122 Summers Bay Drive		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Ridgeland	State MS	Zip Code 39157
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.63176</b>
Name of Employer Requested using best efforts		Amount of Each Receipt this Period
Occupation Requested using best efforts		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="225.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1175.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 22 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Gregory Elder</b>		Date of Receipt
Mailing Address 1536 24th Street SW		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Vero Beach	FL	32962
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : <b>SA11AI.62778</b>
Morgan Tire & Auto	Service Manager	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) <b>B. Joe Ernsberger</b>		Date of Receipt
Mailing Address 1120 Glen Lea Lane		<input type="text" value="11"/> / <input type="text" value="11"/> / <input type="text" value="2012"/>
City	State	Zip Code
Harrisonburg	VA	22801
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : <b>SA11AI.63387</b>
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) <b>C. Brent Evans</b>		Date of Receipt
Mailing Address 126 N Holloway Road		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Ballwin	MO	63011
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : <b>SA11AI.63394</b>
Med-Tech	Executive	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1050.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 23 OF 85
<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Sean M Fieler</b>		Date of Receipt
Mailing Address 40 Haslet Avenue		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.61388</b>
Name of Employer Equinox Partners, LP		Amount of Each Receipt this Period
Occupation Financial Analyst		<input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="2500.00"/>		

Full Name (Last, First, Middle Initial) <b>B. David Fogel</b>		Date of Receipt
Mailing Address 470 Mine Hill Road		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City Fairfield	State CT	Zip Code 06824
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.61866</b>
Name of Employer Groton Partners LLC		Amount of Each Receipt this Period
Occupation Private Equity		<input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="2500.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Danny Ford</b>		Date of Receipt
Mailing Address P.O. Box 1245		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City Mt. Vernon	State KY	Zip Code 40456
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.61341</b>
Name of Employer Self-Employed		Amount of Each Receipt this Period
Occupation Realtor Auctioneer		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="1000.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 24 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey Fox</b>		Date of Receipt
Mailing Address 5300 Edgewood		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City Little Rock	State AR	Zip Code 72207
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.62668</b>
Name of Employer Convergys Corporation		Amount of Each Receipt this Period
Occupation President & CEO		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Glenn Goodson</b>		Date of Receipt
Mailing Address 8 Tamar Drive		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City Texarkana	State TX	Zip Code 75503
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.62156</b>
Name of Employer Premium Ice of Arkansas, Inc.		Amount of Each Receipt this Period
Occupation Owner		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="400.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Glenn Goodson</b>		Date of Receipt
Mailing Address 8 Tamar Drive		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City Texarkana	State TX	Zip Code 75503
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.63452</b>
Name of Employer Premium Ice of Arkansas, Inc.		Amount of Each Receipt this Period
Occupation Owner		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="450.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="5100.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 25 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)  
**A. Charles Graves**

Mailing Address 7629 Densmore Avenue

City Van Nuys	State CA	Zip Code 91406
------------------	-------------	-------------------

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

Name of Employer Graves Motorsports	Occupation Owner
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012  
**Transaction ID : SA11Al.62780**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Melanie Groover**

Mailing Address 698 Lightwood Lane

City Hartwell	State GA	Zip Code 30643
------------------	-------------	-------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2012  
**Transaction ID : SA11Al.62727**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**c. Steve Hagan**

Mailing Address 1573 Ohio Road

City Corydon	State IA	Zip Code 50060
-----------------	-------------	-------------------

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

Name of Employer Brame Specialty Company, Inc.	Occupation Human Resources Director
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012  
**Transaction ID : SA11Al.62989**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> 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 26 OF 85
	<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)  
**HUCK PAC**

**A. Sam Hamilton**  
Full Name (Last, First, Middle Initial)

Mailing Address 2201 N. Sangre Road

City Stillwater State OK Zip Code 74075

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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : SA11AI.62064**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 2320 Duneville Street

City Las Vegas State NV Zip Code 89146

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

Name of Employer AV Vegas Occupation Owner

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 / 22 / 2012  
**Transaction ID : SA11AI.62543**

Amount of Each Receipt this Period  
 500.00

**C. Herren C Hickingbotham**  
Full Name (Last, First, Middle Initial)

Mailing Address 11300 N. Rodney Parham Road

City Little Rock State AR Zip Code 72212

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

Name of Employer Hickingbotham Investments, Inc Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2012  
**Transaction ID : SA11AI.63075**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> 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 27 OF 85
	<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)  
**HUCK PAC**

**A. Susan Hicks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2078 E. Longhorn Drive  
City Gilbert State AZ Zip Code 85297  
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 **213.00**

Date of Receipt **10 / 02 / 2012**  
**Transaction ID : SA11AI.61647**  
Amount of Each Receipt this Period **15.00**

**B. Susan Hicks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2078 E. Longhorn Drive  
City Gilbert State AZ Zip Code 85297  
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 **233.00**

Date of Receipt **10 / 17 / 2012**  
**Transaction ID : SA11AI.62070**  
Amount of Each Receipt this Period **20.00**

**C. Lynn Hodges**  
Full Name (Last, First, Middle Initial)  
Mailing Address 107 Mountain Hill Court  
City Fortson State GA Zip Code 31808  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Requested using best efforts Occupation Requested using best efforts  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **205.00**

Date of Receipt **11 / 20 / 2012**  
**Transaction ID : SA11AI.63448**  
Amount of Each Receipt this Period **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... **40.00**  
**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 28 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Joy Holland</b>		Date of Receipt
Mailing Address 2002 Rosemond Avenue		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Jonesboro	AR	72401
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.61857</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
St. Bernards Medical Center	Registered Nurse	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Joy Holland</b>		Date of Receipt
Mailing Address 2002 Rosemond Avenue		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Jonesboro	AR	72401
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.63423</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
St. Bernards Medical Center	Registered Nurse	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Jeff Hoover</b>		Date of Receipt
Mailing Address P.O. Box 985		<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2012"/>
City	State	Zip Code
Jamestown	KY	42629
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.61295</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Commonwealth of Kentucky	State Representative	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1050.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 29 OF 85
	<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)  
**HUCK PAC**

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

Mailing Address 153 Maritime Trail

City Lexington State SC Zip Code 29072

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

Name of Employer Intel Corporation Occupation Sr Software Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 17 / 2012  
**Transaction ID : SA11AI.62043**

Amount of Each Receipt this Period 50.00

**B. Jimmy Humphrey**  
Full Name (Last, First, Middle Initial)

Mailing Address 2200 Potomac Drive

City Houston State TX Zip Code 77057

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

Name of Employer Enjet Occupation Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt 10 / 22 / 2012  
**Transaction ID : SA11AI.62399**

Amount of Each Receipt this Period 25.00

**C. Norma L Kaecker**  
Full Name (Last, First, Middle Initial)

Mailing Address 4015 E. Soliere Avenue

City Flagstaff State AZ Zip Code 86004

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 ▼ 225.00

Date of Receipt 10 / 08 / 2012  
**Transaction ID : SA11AI.61741**

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: (check only one)	PAGE 30 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Norma L Kaecker</b>		Date of Receipt
Mailing Address 4015 E. Soliere Avenue		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code Flagstaff AZ 86004		<b>Transaction ID : SA11AI.62872</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Martin H Kern</b>		Date of Receipt
Mailing Address 5 Cove Court		<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City State Zip Code Water Mill NY 11976		<b>Transaction ID : SA11AI.63478</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer Requested using best efforts	Occupation Requested using best efforts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Barbara A Kirkpatrick</b>		Date of Receipt
Mailing Address 27222 NE 192nd Street		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2012"/>
City State Zip Code Lawson MO 64062		<b>Transaction ID : SA11AI.61737</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="407.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="375.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 31 OF 85
	<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)  
**HUCK PAC**

**A. Darlene Kleiner**  
Full Name (Last, First, Middle Initial)

Mailing Address 1192 Park Avenue  
11D

City New York State NY Zip Code 10126

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

Name of Employer Requested using best efforts Occupation Requested using best efforts

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 / 19 / 2012  
**Transaction ID : SA11AI.63476**

Amount of Each Receipt this Period  
250.00

**B. Phillip Krems**  
Full Name (Last, First, Middle Initial)

Mailing Address 3235 Rocky River Drive  
#2

City Cleveland State OH Zip Code 44111

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 ▼  
325.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2012  
**Transaction ID : SA11AI.61656**

Amount of Each Receipt this Period  
25.00

**C. Phillip Krems**  
Full Name (Last, First, Middle Initial)

Mailing Address 3235 Rocky River Drive  
#2

City Cleveland State OH Zip Code 44111

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 ▼  
365.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012  
**Transaction ID : SA11AI.61980**

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 315.00

**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 32 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Phillip Krem</b>		Date of Receipt
Mailing Address 3235 Rocky River Drive #2		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City Cleveland	State OH	Zip Code 44111
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.62670</b>
Name of Employer Retired		Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="415.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Stephen Kurtz</b>		Date of Receipt
Mailing Address 34035 Park Lane		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>
City Leesburg	State FL	Zip Code 34788
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.62743</b>
Name of Employer Citizens First Bank		Occupation Banker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Brad Lager</b>		Date of Receipt
Mailing Address P.O. Box 723		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City Maryville	State MO	Zip Code 64468
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.63400</b>
Name of Employer NW MO Cellular		Occupation Telecommunications
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1550.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 33 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Michael Lamoureux</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2012
Mailing Address 103 West Parkway Suite 1B		<b>Transaction ID : SA11AI.61361</b>
City Russellville	State AR	Zip Code 72801
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Robert Levesque</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2012
Mailing Address 6355 Vintage Court		<b>Transaction ID : SA11AI.62744</b>
City Lockport	State NY	Zip Code 14094
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer Self-Employed	Occupation HealthCare Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Steve Loghry</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 775 Cove View Circle		<b>Transaction ID : SA11AI.61971</b>
City Cookeville	State TN	Zip Code 38506
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer First National Bank	Occupation Information Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1075.00
<b>TOTAL</b> 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 34 OF 85
	<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)  
**HUCK PAC**

**A. Shelby Lorenzen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5262 Moore Loop  
City Crestview State FL Zip Code 32536  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Homemaker Occupation Homemaker  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **500.00**

Date of Receipt **10 / 17 / 2012**  
**Transaction ID : SA11AI.61320**  
Amount of Each Receipt this Period **50.00**

**B. Shelby Lorenzen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5262 Moore Loop  
City Crestview State FL Zip Code 32536  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Homemaker Occupation Homemaker  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **550.00**

Date of Receipt **11 / 19 / 2012**  
**Transaction ID : SA11AI.63474**  
Amount of Each Receipt this Period **50.00**

**C. Barry Luxton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3 Valley Drive  
City Union State MO Zip Code 63084  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Requested using best efforts Occupation Requested using best efforts  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **225.00**

Date of Receipt **10 / 04 / 2012**  
**Transaction ID : SA11AI.61675**  
Amount of Each Receipt this Period **75.00**

**SUBTOTAL** of Receipts This Page (optional)..... **175.00**  
**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 35 OF 85
	<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)  
**HUCK PAC**

**A. Barry Luxton**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 Valley Drive

City Union State MO Zip Code 63084

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

Name of Employer Requested using best efforts Occupation Requested using best efforts

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 / 04 / 2012**

**Transaction ID : SA11AI.63328**

Amount of Each Receipt this Period  
**75.00**

**B. Tom Lynch**  
Full Name (Last, First, Middle Initial)

Mailing Address 1050 Dye Lane

City Summit State MS Zip Code 39666

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 ▼ **205.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11AI.63204**

Amount of Each Receipt this Period  
**5.00**

**C. Tom Lynch**  
Full Name (Last, First, Middle Initial)

Mailing Address 1050 Dye Lane

City Summit State MS Zip Code 39666

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 ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : SA11AI.63205**

Amount of Each Receipt this Period  
**5.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **85.00**

**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 36 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

**A. Tom Lynch**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1050 Dye Lane

City Summit	State MS	Zip Code 39666
----------------	-------------	-------------------

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 ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2012

**Transaction ID : SA11AI.63437**

Amount of Each Receipt this Period  
5.00

**B. Tom Lynch**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1050 Dye Lane

City Summit	State MS	Zip Code 39666
----------------	-------------	-------------------

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 ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2012

**Transaction ID : SA11AI.63438**

Amount of Each Receipt this Period  
5.00

**C. Norma Matheny**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5105 Bromely Drive

City Corpus Christi	State TX	Zip Code 78413
------------------------	-------------	-------------------

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

Name of Employer City Church Corpus Christi	Occupation Office Manager
--	------------------------------

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	/	30	/	2012

**Transaction ID : SA11AI.62783**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 37 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. M. Myers Mermel</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2012 <b>Transaction ID : SA11AI.61386</b>
Mailing Address 375 Park Avenue Suite 2402		Amount of Each Receipt this Period 2500.00
City New York	State NY	Zip Code 10152
FEC ID number of contributing federal political committee. C		
Name of Employer Mermel & McLain Management LLC	Occupation CEO and Co-Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Sandra Millsap</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2012 <b>Transaction ID : SA11AI.61376</b>
Mailing Address P.O. Box 938		Amount of Each Receipt this Period 2000.00
City Danville	State AR	Zip Code 72833
FEC ID number of contributing federal political committee. C		
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Linda Moon</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2012 <b>Transaction ID : SA11AI.62012</b>
Mailing Address 8665 Highway 822		Amount of Each Receipt this Period 25.00
City Dubach	State LA	Zip Code 71235
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4525.00
<b>TOTAL</b> 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 38 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert Murphy**

Mailing Address 1 Aspen Drive  
Unit 82

City Loveland State CO Zip Code 80538-2597

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

Name of Employer Requested using best efforts Occupation Requested using best efforts

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2012  
**Transaction ID : SA11AI.61346**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Thomas Mustian**

Mailing Address 1080 N 2475 W

City Layton State UT Zip Code 84041

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

Name of Employer USAF Occupation Budget Analyst

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 22 / 2012  
**Transaction ID : SA11AI.62385**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Robert Odell**

Mailing Address 9632 Grand Isle Lane

City Las Vegas State NV Zip Code 89144

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2012  
**Transaction ID : SA11AI.62932**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

**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 39 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

**A. Jeanne L Patterson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 E Dundee Circle  
 City State Zip Code  
 Village Loch Loyd MO 64012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Show Me State Series Founder  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2012  
**Transaction ID : SA11AI.63396**  
 Amount of Each Receipt this Period  
 2500.00

**B. Connie Payton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27307 Hemet Street  
 City State Zip Code  
 Hemet CA 92544  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired 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  
 10 / 07 / 2012  
**Transaction ID : SA11AI.61715**  
 Amount of Each Receipt this Period  
 25.00

**C. Connie Payton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27307 Hemet Street  
 City State Zip Code  
 Hemet CA 92544  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2012  
**Transaction ID : SA11AI.63362**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2550.00
<b>TOTAL</b> 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 40 OF 85
	<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)  
**HUCK PAC**

**A. Don Payton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 27307 Hemet Street  
City Hemet State CA Zip Code 92544  
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 ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 07 / 2012  
**Transaction ID : SA11AI.61714**  
Amount of Each Receipt this Period  
250.00

**B. Don Payton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 27307 Hemet Street  
City Hemet State CA Zip Code 92544  
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 ▼ 275.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 07 / 2012  
**Transaction ID : SA11AI.63361**  
Amount of Each Receipt this Period  
25.00

**C. Kay Payton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5303 E. 79th Street  
City Tulsa State OK Zip Code 74136  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Celebrity Attractions Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 11 / 2012  
**Transaction ID : SA11AI.61816**  
Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5050.00  
**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 41 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Larry Payton</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2012 <b>Transaction ID : SA11AI.61815</b>
Mailing Address 5303 E. 79th Street		Amount of Each Receipt this Period 5000.00
City Tulsa	State OK	Zip Code 74136
FEC ID number of contributing federal political committee. C	Name of Employer Celebrity Attractions	Occupation Owner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Jean Peck</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2012 <b>Transaction ID : SA11AI.62620</b>
Mailing Address 9108 Olympic View Drive		Amount of Each Receipt this Period 100.00
City Edmonds	State WA	Zip Code 98026
FEC ID number of contributing federal political committee. C	Name of Employer Retired	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Pickens</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 30 / 2012 <b>Transaction ID : SA11AI.61367</b>
Mailing Address 123 Orleans Drive		Amount of Each Receipt this Period 1000.00
City Maumelle	State AR	Zip Code 72113
FEC ID number of contributing federal political committee. C	Name of Employer Mike Pickens Law Firm	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6100.00
<b>TOTAL</b> 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 42 OF 85
	<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)  
**HUCK PAC**

**A. Gary Podell**  
Full Name (Last, First, Middle Initial)

Mailing Address 15 West 39th Street

City New York State NY Zip Code 10018

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

Name of Employer Vintage Group, LLC Occupation Developer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2012

**Transaction ID : SA11AI.61515**

Amount of Each Receipt this Period  
2500.00

**B. Herbert S Podell**  
Full Name (Last, First, Middle Initial)

Mailing Address 605 Third Avenue

City New York State NY Zip Code 10158

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

Name of Employer Podell Shwartz Schechter et al Occupation Senior Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2012

**Transaction ID : SA11AI.61311**

Amount of Each Receipt this Period  
5000.00

**C. Lorraine Podell**  
Full Name (Last, First, Middle Initial)

Mailing Address 605 Third Avenue

City New York State NY Zip Code 10159

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2012

**Transaction ID : SA11AI.61313**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 12500.00

**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 43 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. David Polyansky</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2012 <b>Transaction ID : SA11AI.61343</b>
Mailing Address 220 E 63rd Street Apt. 7F		Amount of Each Receipt this Period 2500.00
City New York	State NY	
Zip Code 10065		Aggregate Year-to-Date ▼ 2500.00
FEC ID number of contributing federal political committee. C		
Name of Employer New Strategies Group, LLC	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Janet R Price</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 12 / 2012 <b>Transaction ID : SA11AI.61297</b>
Mailing Address 3514 Hedgewick Place		Amount of Each Receipt this Period 5000.00
City Louisville	State KY	
Zip Code 40245		Aggregate Year-to-Date ▼ 5000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Charah, Inc.	Occupation Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Tony Raffo</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 22 / 2012 <b>Transaction ID : SA11AI.62366</b>
Mailing Address 212 Swansea Road		Amount of Each Receipt this Period 500.00
City Spartanburg	State SC	
Zip Code 29307		Aggregate Year-to-Date ▼ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Requested using best efforts	Occupation Requested using best efforts	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<b>TOTAL</b> 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 44 OF 85
	<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)  
**HUCK PAC**

**A. Beth A Rankin**  
Full Name (Last, First, Middle Initial)

Mailing Address 361 Columbia Road #449

City Magnolia State AR Zip Code 71753

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

Name of Employer Beth Anne Productions, Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
10 / 30 / 2012  
**Transaction ID : SA11AI.61373**

Amount of Each Receipt this Period  
500.00

**B. David F Rankin**  
Full Name (Last, First, Middle Initial)

Mailing Address 361 Columbia Road #449

City Magnolia State AR Zip Code 71753

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

Name of Employer Southern Arkansas University Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
10 / 30 / 2012  
**Transaction ID : SA11AI.61371**

Amount of Each Receipt this Period  
500.00

**C. Eric Redman**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 930

City Rathdrum State ID Zip Code 83858

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

Name of Employer Redman Company Insurance, Inc. Occupation Insurance Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
10 / 01 / 2012  
**Transaction ID : SA11AI.61435**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00

**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 45 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Eric Redman</b>		Date of Receipt 11 / 01 / 2012 <b>Transaction ID : SA11AI.63109</b>
Mailing Address P.O. Box 930		Amount of Each Receipt this Period 100.00
City Rathdrum	State ID	Zip Code 83858
FEC ID number of contributing federal political committee. C		
Name of Employer Redman Company Insurance, Inc.	Occupation Insurance Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Clint Reed</b>		Date of Receipt 10 / 30 / 2012 <b>Transaction ID : SA11AI.61380</b>
Mailing Address 2223 E Longhills		Amount of Each Receipt this Period 500.00
City Benton	State AR	Zip Code 72019
FEC ID number of contributing federal political committee. C		
Name of Employer Impact Management Group	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. John E. Regenold</b>		Date of Receipt 10 / 19 / 2012 <b>Transaction ID : SA11AI.62126</b>
Mailing Address P.O. Box 70		Amount of Each Receipt this Period 1000.00
City Armored	State AR	Zip Code 72310
FEC ID number of contributing federal political committee. C		
Name of Employer Requested Using Best Efforts	Occupation Requested Using Best Efforts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> 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 46 OF 85
	<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)  
**HUCK PAC**

**A. James G Robinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 Country Club Drive  
 City Country Club State MO Zip Code 64505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Requested using best efforts  
 Occupation Requested using best efforts  
 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  
 11 / 05 / 2012  
**Transaction ID : SA11AI.63398**  
 Amount of Each Receipt this Period  
 500.00

**B. Allen Roth**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 255 Raymond Street  
 City Rockville Centre State NY Zip Code 11570  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Requested using best efforts  
 Occupation Requested using best efforts  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2012  
**Transaction ID : SA11AI.62638**  
 Amount of Each Receipt this Period  
 2500.00

**C. Bradley Saft**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1192 Park Avenue  
 City New York State NY Zip Code 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Requested using best efforts  
 Occupation Requested using best efforts  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2012  
**Transaction ID : SA11AI.62616**  
 Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8000.00
<b>TOTAL</b> 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 47 OF 85
	<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)  
**HUCK PAC**

**A. Stuart Saft**  
Full Name (Last, First, Middle Initial)

Mailing Address 1040 Park Avenue

City New York State NY Zip Code 10028

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

Name of Employer Le Boeuf Lamb Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : SA11AI.62760**

Amount of Each Receipt this Period  
 2500.00

**B. David Schilling**  
Full Name (Last, First, Middle Initial)

Mailing Address 7690 County Highway 134

City Nevada State OH Zip Code 44849

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

Name of Employer Self-Employed Occupation Farmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2012

**Transaction ID : SA11AI.61987**

Amount of Each Receipt this Period  
 40.00

**C. Roger Sherman**  
Full Name (Last, First, Middle Initial)

Mailing Address 1124 12th Avenue NW

City Arab State AL Zip Code 35016

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

Name of Employer Lockheed Martin Space Systems Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : SA11AI.61698**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2640.00
<b>TOTAL</b> 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 48 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Roger Sherman</b>		Date of Receipt
Mailing Address 1124 12th Avenue NW		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City Arab State AL Zip Code 35016		<b>Transaction ID : SA11Al.63350</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Lockheed Martin Space Systems Occupation Engineer		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1100.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Nicholas X Simon</b>		Date of Receipt
Mailing Address 4226 Dolphin Road		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City Louisville State KY Zip Code 40220		<b>Transaction ID : SA11Al.61339</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Publishers Press Occupation President		<input type="text" value="2000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Jim Sinclair</b>		Date of Receipt
Mailing Address 50 Old Belmont Road		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2012"/>
City Lincolville State ME Zip Code 04849		<b>Transaction ID : SA11Al.62549</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Bank of America Occupation Project Manager		<input type="text" value="5.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="330.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2105.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 49 OF 85
	<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)  
**A. Carmen Smallwood**

Mailing Address 18824 Townline Road

City Mokena State IL Zip Code 60448

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 ▼ **475.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11AI.62658**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**B. Carmen Smallwood**

Mailing Address 18824 Townline Road

City Mokena State IL Zip Code 60448

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 ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : SA11AI.62659**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**C. Carmen Smallwood**

Mailing Address 18824 Townline Road

City Mokena State IL Zip Code 60448

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 ▼ **525.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 24 / 2012**

**Transaction ID : SA11AI.63466**

Amount of Each Receipt this Period  
**25.00**

**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 50 OF 85
	<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)  
**HUCK PAC**

**A. Carmen Smallwood**  
Full Name (Last, First, Middle Initial)  
Mailing Address 18824 Townline Road  
City Mokena State IL Zip Code 60448  
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 **550.00**

Date of Receipt **11 / 24 / 2012**  
**Transaction ID : SA11AI.63467**  
Amount of Each Receipt this Period **250.00**

**B. Bettie Smith**  
Full Name (Last, First, Middle Initial)  
Mailing Address 13915 S. Chapman Rd.  
City Medical Lake State WA Zip Code 99022  
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 **750.00**

Date of Receipt **10 / 12 / 2012**  
**Transaction ID : SA11AI.61307**  
Amount of Each Receipt this Period **100.00**

**C. Lancia Smith**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1061 E. 133rd Way  
City Thornton State CO Zip Code 80241  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Smith Environmental and Engineering Occupation Executive Managment / Writer  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **590.00**

Date of Receipt **10 / 03 / 2012**  
**Transaction ID : SA11AI.61665**  
Amount of Each Receipt this Period **50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **175.00**  
**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 51 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Lancia Smith</b>		Date of Receipt
Mailing Address 1061 E. 133rd Way		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2012"/>
City Thornton State CO Zip Code 80241		<b>Transaction ID : SA11AI.63295</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Smith Environmental and Engineering Occupation Executive Managment / Writer		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="640.00"/>

Full Name (Last, First, Middle Initial) <b>B. Doug Stanaland</b>		Date of Receipt
Mailing Address P.O. Box 4240		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Calabash State NC Zip Code 28467		<b>Transaction ID : SA11AI.61422</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Requested using best efforts Occupation Requested using best efforts		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="400.00"/>

Full Name (Last, First, Middle Initial) <b>C. Doug Stanaland</b>		Date of Receipt
Mailing Address P.O. Box 4240		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Calabash State NC Zip Code 28467		<b>Transaction ID : SA11AI.63098</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Requested using best efforts Occupation Requested using best efforts		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="450.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 52 OF 85
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)  
**A. Neil Steiner**

Mailing Address 671 N Armistead Street

City Alexandria State VA Zip Code 22312

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

Name of Employer Univ. of Southern California Occupation Researcher

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 / 17 / 2012  
**Transaction ID : SA11AI.62024**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. Neil Steiner**

Mailing Address 671 N Armistead Street

City Alexandria State VA Zip Code 22312

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

Name of Employer Univ. of Southern California Occupation Researcher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2012  
**Transaction ID : SA11AI.63432**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**C. Valerie Swearingen**

Mailing Address 460 Nice Place Road

City Clever State MO Zip Code 65631

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

Name of Employer St. John's Occupation Family and Patient Advocate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2012  
**Transaction ID : SA11AI.62730**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 100.00

**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 53 OF 85
	<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)  
**HUCK PAC**

**A. Larry Trahan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1850 S Westwood  
Unit 15

City Mesa State AZ Zip Code 85210

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 ▼  
475.00

Date of Receipt  
10 / 24 / 2012  
Transaction ID : SA11AI.62669

Amount of Each Receipt this Period  
100.00

**B. Donald J Trump**  
Full Name (Last, First, Middle Initial)

Mailing Address 725 5th Avenue

City New York State NY Zip Code 10022

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

Name of Employer Trump Organization Occupation Entrepreneur

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
10 / 24 / 2012  
Transaction ID : SA11AI.61330

Amount of Each Receipt this Period  
2500.00

**C. Robert Ward**  
Full Name (Last, First, Middle Initial)

Mailing Address 5203 N. Mount Road

City Scottsburg State IN Zip Code 47170

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

Name of Employer Self-Employed Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
10 / 17 / 2012  
Transaction ID : SA11AI.62067

Amount of Each Receipt this Period  
350.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2950.00

**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 54 OF 85
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Carol Weibert</b>		Date of Receipt
Mailing Address 2731 Heartland Valley Road		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
Manhattan	KS	66503
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.61639</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Decatur County Feed Yard Inc.	Controller	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Carol Weibert</b>		Date of Receipt
Mailing Address 2731 Heartland Valley Road		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2012"/>
City	State	Zip Code
Manhattan	KS	66503
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.62036</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Decatur County Feed Yard Inc.	Controller	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Helene Weiss</b>		Date of Receipt
Mailing Address 950 Park Avenue		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
New York	NY	10028
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.61392</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Requested using best efforts	Requested using best efforts	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="800.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 55 OF 85
	<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)  
**HUCK PAC**

**A. Linda Wesson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4860 N Treasure Circle  
City Prescott State AZ Zip Code 86314  
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 **295.00**

Date of Receipt **10 / 01 / 2012**  
**Transaction ID : SA11AI.61462**  
Amount of Each Receipt this Period **25.00**

**B. Linda Wesson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4860 N Treasure Circle  
City Prescott State AZ Zip Code 86314  
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 **320.00**

Date of Receipt **11 / 01 / 2012**  
**Transaction ID : SA11AI.63121**  
Amount of Each Receipt this Period **25.00**

**C. Doris L Wolfe**  
Full Name (Last, First, Middle Initial)  
Mailing Address 706 W. Katella Court  
City Springfield State MO Zip Code 65807  
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 **210.00**

Date of Receipt **11 / 04 / 2012**  
**Transaction ID : SA11AI.63326**  
Amount of Each Receipt this Period **25.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>75.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>115348.00</b>

**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 56 OF 85
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Cotton for Congress</b>		Date of Receipt
Mailing Address P.O. Box 379		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Dardanelle	AR	72834
FEC ID number of contributing federal political committee.	<input type="text" value="C00499988"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1000.00"/>	
		Transaction ID : <b>SA11B.63501</b>
		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>B. Crawford for Congress</b>		Date of Receipt
Mailing Address P.O. Box 16956		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2012"/>
City	State	Zip Code
Jonesboro	AR	72403
FEC ID number of contributing federal political committee.	<input type="text" value="C00462374"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1000.00"/>	
		Transaction ID : <b>SA11B.63505</b>
		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>C. Re-Elect Tim Griffin for Congress Committee</b>		Date of Receipt
Mailing Address P.O. Box 7526		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Little Rock	AR	72217
FEC ID number of contributing federal political committee.	<input type="text" value="C00468116"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="5000.00"/>	
		Transaction ID : <b>SA11B.63503</b>
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="7000.00"/>

**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 57 OF 85
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)  
**A. Federal Office Republicans of New York (FORNY PAC)**

Mailing Address P.O. Box 22

City Tuxedo State NY Zip Code 10987

FEC ID number of contributing federal political committee. **C C00488809**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 30 / 2012**  
**Transaction ID : SA11C.63502**

Amount of Each Receipt this Period **500.00**

Full Name (Last, First, Middle Initial)  
**B. Majority in Congress PAC**

Mailing Address 601 N Ferncreek Avenue Suite 200

City Orlando State FL Zip Code 32803

FEC ID number of contributing federal political committee. **C C00402909**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **10 / 17 / 2012**  
**Transaction ID : SA11C.63500**

Amount of Each Receipt this Period **5000.00**

Full Name (Last, First, Middle Initial)  
**C. Wal-Mart Stores Inc. PAC For Responsible Government**

Mailing Address 702 S.W. 8th Street

City Bentonville State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **11 / 08 / 2012**  
**Transaction ID : SA11C.63504**

Amount of Each Receipt this Period **1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>6500.00</b>

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. AT&T Mobility**

Mailing Address PO Box 6463

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement  
Telephone Service

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 Y Y  
10 / 18 / 2012

**Transaction ID : SB21B.61220**

Amount of Each Disbursement this Period

141.13

Full Name (Last, First, Middle Initial)

**B. AT&T Mobility**

Mailing Address PO Box 6463

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement  
Telephone Service

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 Y Y  
11 / 21 / 2012

**Transaction ID : SB21B.61288**

Amount of Each Disbursement this Period

141.13

Full Name (Last, First, Middle Initial)

**C. GSL Solutions, Inc.**

Mailing Address 1411 N. Westchore Boulevard  
Suite 204

City Tampa State FL Zip Code 33607

Purpose of Disbursement  
Web Development/Hosting

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 Y Y  
10 / 17 / 2012

**Transaction ID : SB21B.61205**

Amount of Each Disbursement this Period

1627.37

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

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

1909.63

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022

Purpose of Disbursement  
Payroll

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
10		15		2012

**Transaction ID : SB21B.61198**

Amount of Each Disbursement this Period

1650.00
---------

Full Name (Last, First, Middle Initial)

**B. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022

Purpose of Disbursement  
Reimbursement - Insurance

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
10		15		2012

**Transaction ID : SB21B.61199**

Amount of Each Disbursement this Period

182.49
--------

Full Name (Last, First, Middle Initial)

**C. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022

Purpose of Disbursement  
Payroll

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
10		31		2012

**Transaction ID : SB21B.61247**

Amount of Each Disbursement this Period

1650.00
---------

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

3482.49
---------

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022

Purpose of Disbursement  
Employer HSA Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 14 / 2012

**Transaction ID : SB21B.61281**

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

**B. Katherine E. Harris**

Mailing Address 3226 Stonepine

City State Zip Code  
Bryant AR 72022

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 15 / 2012

**Transaction ID : SB21B.61280**

Amount of Each Disbursement this Period

1650.00

Full Name (Last, First, Middle Initial)

**C. Lauren Huckabee**

Mailing Address 500 Parliament Street

City State Zip Code  
Little Rock AR 72211

Purpose of Disbursement  
Employer HSA Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 15 / 2012

**Transaction ID : SB21B.61282**

Amount of Each Disbursement this Period

1200.00

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

4050.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

### A. JPMS Cox, PLLC

Mailing Address 11300 Cantrell Road  
Suite 301

City Little Rock State AR Zip Code 72212

Purpose of Disbursement  
Accounting and Compliance Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2012

Transaction ID : SB21B.61264

Amount of Each Disbursement this Period

18812.13

Full Name (Last, First, Middle Initial)

### B. LCM Strategies

Mailing Address 3409 Hopkins Street

City Nashville State TN Zip Code 37215

Purpose of Disbursement  
Online Marketing - PAC Fundraising

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 / 2012

Transaction ID : SB21B.61188

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

### C. Legacy Consulting, Inc.

Mailing Address P.O. Box 409

City De Queen State AR Zip Code 71832

Purpose of Disbursement  
Consulting and Fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : SB21B.61190

Amount of Each Disbursement this Period

7807.44

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

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

31119.57

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial) <b>A. Legacy Consulting, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2012
Mailing Address P.O. Box 409		<b>Transaction ID : SB21B.61236</b>
City De Queen	State AR	
Zip Code 71832	Purpose of Disbursement Consulting and Fundraising	Amount of Each Disbursement this Period 14668.38
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Legacy Consulting, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2012
Mailing Address P.O. Box 409		<b>Transaction ID : SB21B.61246</b>
City De Queen	State AR	
Zip Code 71832	Purpose of Disbursement Consulting and Fundraising	Amount of Each Disbursement this Period 4783.46
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Paychex, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2012
Mailing Address 12921 Cantrell Road Suite 100		<b>Transaction ID : SB21B.61204</b>
City Little Rock	State AR	
Zip Code 72223	Purpose of Disbursement Payroll Processing Fee	Amount of Each Disbursement this Period 75.17
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	19527.01
<b>TOTAL</b> 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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**

Mailing Address 12921 Cantrell Road  
Suite 100

City Little Rock State AR Zip Code 72223

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

**Transaction ID : SB21B.61202**

Amount of Each Disbursement this Period

126.23

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**

Mailing Address 12921 Cantrell Road  
Suite 100

City Little Rock State AR Zip Code 72223

Purpose of Disbursement  
Payroll Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

**Transaction ID : SB21B.61203**

Amount of Each Disbursement this Period

110.67

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**

Mailing Address 12921 Cantrell Road  
Suite 100

City Little Rock State AR Zip Code 72223

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2012

**Transaction ID : SB21B.61248**

Amount of Each Disbursement this Period

126.23

Category/  
Type

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

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

363.13

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**

Mailing Address 12921 Cantrell Road  
Suite 100

City Little Rock State AR Zip Code 72223

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 01 / 2012

Transaction ID : **SB21B.61249**

Amount of Each Disbursement this Period: 75.17

Category/Type

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**

Mailing Address 12921 Cantrell Road  
Suite 100

City Little Rock State AR Zip Code 72223

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 15 / 2012

Transaction ID : **SB21B.61278**

Amount of Each Disbursement this Period: 100.17

Category/Type

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**

Mailing Address 12921 Cantrell Road  
Suite 100

City Little Rock State AR Zip Code 72223

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 15 / 2012

Transaction ID : **SB21B.61279**

Amount of Each Disbursement this Period: 126.23

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 301.57

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2012

**Transaction ID : SB21B.61184**

Amount of Each Disbursement this Period

197.24

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2012

**Transaction ID : SB21B.61185**

Amount of Each Disbursement this Period

16.92

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2012

**Transaction ID : SB21B.61186**

Amount of Each Disbursement this Period

10.94

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

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

225.10

**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)  
**HUCK PAC**

**A. Paypal**

Full Name (Last, First, Middle Initial)

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 04 / 2012

**Transaction ID : SB21B.61187**

Amount of Each Disbursement this Period: 22.12

Category/Type

**B. Paypal**

Full Name (Last, First, Middle Initial)

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 05 / 2012

**Transaction ID : SB21B.61189**

Amount of Each Disbursement this Period: 5.80

Category/Type

**C. Paypal**

Full Name (Last, First, Middle Initial)

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 06 / 2012

**Transaction ID : SB21B.61191**

Amount of Each Disbursement this Period: 4.19

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 32.11

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2012

**Transaction ID : SB21B.61192**

Amount of Each Disbursement this Period

5.46

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2012

**Transaction ID : SB21B.61193**

Amount of Each Disbursement this Period

31.23

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 09 / 2012

**Transaction ID : SB21B.61194**

Amount of Each Disbursement this Period

11.27

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

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

47.96

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 10 / 2012

**Transaction ID : SB21B.61195**

Amount of Each Disbursement this Period

96.25

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 11 / 2012

**Transaction ID : SB21B.61196**

Amount of Each Disbursement this Period

230.77

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 12 / 2012

**Transaction ID : SB21B.61197**

Amount of Each Disbursement this Period

1.99

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

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

329.01

# 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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

### A. Paypal

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 13 / 2012

Transaction ID : SB21B.61200

Amount of Each Disbursement this Period

2.11

Full Name (Last, First, Middle Initial)

### B. Paypal

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 14 / 2012

Transaction ID : SB21B.61201

Amount of Each Disbursement this Period

8.24

Full Name (Last, First, Middle Initial)

### C. Paypal

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 15 / 2012

Transaction ID : SB21B.61218

Amount of Each Disbursement this Period

5.95

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

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

16.30

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.61222**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.61223**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.61224**

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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.61225**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.61226**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.61227**

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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 22 / 2012

**Transaction ID : SB21B.61229**

Amount of Each Disbursement this Period

342.66

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 23 / 2012

**Transaction ID : SB21B.61230**

Amount of Each Disbursement this Period

233.81

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 2012

**Transaction ID : SB21B.61231**

Amount of Each Disbursement this Period

191.27

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

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

767.74

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 25 / 2012

**Transaction ID : SB21B.61232**

Amount of Each Disbursement this Period

18.29

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 26 / 2012

**Transaction ID : SB21B.61233**

Amount of Each Disbursement this Period

30.94

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 27 / 2012

**Transaction ID : SB21B.61234**

Amount of Each Disbursement this Period

9.51

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

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

58.74

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 28 / 2012

Transaction ID : SB21B.61235

Amount of Each Disbursement this Period

24.13

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 29 / 2012

Transaction ID : SB21B.61250

Amount of Each Disbursement this Period

98.41

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 30 / 2012

Transaction ID : SB21B.61253

Amount of Each Disbursement this Period

18.15

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

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

140.69

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 2012

Transaction ID : SB21B.61254

Amount of Each Disbursement this Period

128.96

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 / 2012

Transaction ID : SB21B.61255

Amount of Each Disbursement this Period

71.02

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2012

Transaction ID : SB21B.61256

Amount of Each Disbursement this Period

33.13

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

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

233.11

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2012

**Transaction ID : SB21B.61258**

Amount of Each Disbursement this Period

17.96

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2012

**Transaction ID : SB21B.61259**

Amount of Each Disbursement this Period

12.26

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2012

**Transaction ID : SB21B.61261**

Amount of Each Disbursement this Period

9.70

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

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

39.92

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 06 / 2012

Transaction ID : SB21B.61262

Amount of Each Disbursement this Period

1.67

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2012

Transaction ID : SB21B.61263

Amount of Each Disbursement this Period

1.81

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 08 / 2012

Transaction ID : SB21B.61265

Amount of Each Disbursement this Period

3.48

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

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

6.96

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2012

**Transaction ID : SB21B.61266**

Amount of Each Disbursement this Period

3.65

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2012

**Transaction ID : SB21B.61267**

Amount of Each Disbursement this Period

3.59

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 11 / 2012

**Transaction ID : SB21B.61268**

Amount of Each Disbursement this Period

2.76

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

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

10.00

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 Y  
11 / 12 / 2012

**Transaction ID : SB21B.61269**

Amount of Each Disbursement this Period

4.36

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 Y  
11 / 14 / 2012

**Transaction ID : SB21B.61273**

Amount of Each Disbursement this Period

2.19

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 Y  
11 / 15 / 2012

**Transaction ID : SB21B.61274**

Amount of Each Disbursement this Period

1.26

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

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

7.81

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.61275**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.61276**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.61277**

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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.61285**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.61286**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.61287**

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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 Y  
11 / 22 / 2012

**Transaction ID : SB21B.61289**

Amount of Each Disbursement this Period

3.17

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 Y  
11 / 23 / 2012

**Transaction ID : SB21B.61290**

Amount of Each Disbursement this Period

1.80

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

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 Y  
11 / 24 / 2012

**Transaction ID : SB21B.61291**

Amount of Each Disbursement this Period

2.52

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

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

7.49

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 25 / 2012

Transaction ID : SB21B.61292

Amount of Each Disbursement this Period

1.33

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 4100 Solutions Center  
774100

City Chicago State IL Zip Code 60677

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 26 / 2012

Transaction ID : SB21B.61293

Amount of Each Disbursement this Period

6.95

Full Name (Last, First, Middle Initial)

**C. QualChoice**

Mailing Address 10825 Financial Centre Parkway

City Little Rock State AR Zip Code 72211

Purpose of Disbursement  
Employee Health Insurance

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 / 2012

Transaction ID : SB21B.61257

Amount of Each Disbursement this Period

936.66

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

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

944.94

**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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

**A. Security BankCard Center**

Mailing Address P.O. Box 6139

City Norman State OK Zip Code 73070

Purpose of Disbursement  
Credit Card Payment - No Itemization Required

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2012

Transaction ID : **SB21B.61237**

Amount of Each Disbursement this Period

41.28

Full Name (Last, First, Middle Initial)

**B. Security BankCard Center**

Mailing Address P.O. Box 6139

City Norman State OK Zip Code 73070

Purpose of Disbursement  
Credit Card Payment - See Memo

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2012

Transaction ID : **SB21B.61242**

Amount of Each Disbursement this Period

21.34

Full Name (Last, First, Middle Initial)

**C. US Postal Service**

Mailing Address 1601 Assembly Street

City Columbia State SC Zip Code 29201

Purpose of Disbursement  
Postage - PAC Operations

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2012

Transaction ID : **SB21B.61242.0**

Amount of Each Disbursement this Period

11.35

[MEMO ITEM]

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

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

62.62

# 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)  
**HUCK PAC**

Full Name (Last, First, Middle Initial)

### A. TPrint Solutions

Mailing Address 4150 East 43rd Street

City North Little Rock State AR Zip Code 72117-2502

Purpose of Disbursement  
Office Expense - Supplies

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	Y	Y
1	0		1	8		2	0	1	2	1	2

Transaction ID : SB21B.61221

Amount of Each Disbursement this Period

5	5	4	.	3	7
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Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

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	Y	Y

Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

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	Y	Y

Amount of Each Disbursement this Period

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

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

5	5	4	.	3	7
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6	4	5	8	5	.	3	4
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