



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DCI PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="15733.57"/>	<input type="text" value="15733.57"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17215.79"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="8384.66"/>	<input type="text" value="25614.32"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="25600.45"/>	<input type="text" value="41347.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12169.39"/>	<input type="text" value="27916.83"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="13431.06"/>	<input type="text" value="13431.06"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**DCI PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6992.00	20057.00
(ii) Unitemized .....	1392.66	5557.32
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	8384.66	25614.32
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	8384.66	25614.32
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	8384.66	25614.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8384.66	25614.32

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2669.39	6936.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2669.39	6936.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	20980.06
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12169.39	27916.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12169.39	27916.83

**DETAILED SUMMARY PAGE**  
of Disbursements

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<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	8384.66	25614.32
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8384.66	25614.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2669.39	6936.77
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2669.39	6936.77

**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 33
	<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)  
**DCI PAC**

**A. Carl Bentzel**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4908 Willes Vison Dr  
City Bowie State MD Zip Code 20720  
FEC ID number of contributing federal political committee. **C**  
Name of Employer DCI Group LLC Occupation Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 26 / 2012  
**Transaction ID : SA11AI.6553**  
Amount of Each Receipt this Period 150.00

**B. Carl Bentzel**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4908 Willes Vison Dr  
City Bowie State MD Zip Code 20720  
FEC ID number of contributing federal political committee. **C**  
Name of Employer DCI Group LLC Occupation Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 31 / 2012  
**Transaction ID : SA11AI.6554**  
Amount of Each Receipt this Period 150.00

**C. Carl Bentzel**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4908 Willes Vison Dr  
City Bowie State MD Zip Code 20720  
FEC ID number of contributing federal political committee. **C**  
Name of Employer DCI Group LLC Occupation Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 29 / 2012  
**Transaction ID : SA11AI.6555**  
Amount of Each Receipt this Period 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 33
	<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)  
**DCI PAC**

Full Name (Last, First, Middle Initial) <b>A. Megan B Bloomgren</b>		Date of Receipt MM / DD / YYYY 04 / 26 / 2012 <b>Transaction ID : SA11AI.6556</b>
Mailing Address 5913 Skyline Heights Courts		Amount of Each Receipt this Period 100.00
City Alexandria	State VA	Zip Code 22311
FEC ID number of contributing federal political committee. C		
Name of Employer DCI Group LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Megan B Bloomgren</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.6557</b>
Mailing Address 5913 Skyline Heights Courts		Amount of Each Receipt this Period 100.00
City Alexandria	State VA	Zip Code 22311
FEC ID number of contributing federal political committee. C		
Name of Employer DCI Group LLC	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. Megan B Bloomgren</b>		Date of Receipt MM / DD / YYYY 06 / 29 / 2012 <b>Transaction ID : SA11AI.6558</b>
Mailing Address 5913 Skyline Heights Courts		Amount of Each Receipt this Period 100.00
City Alexandria	State VA	Zip Code 22311
FEC ID number of contributing federal political committee. C		
Name of Employer DCI Group LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<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: PAGE 8 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Stacey Chamberlain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 S Virginia Ave  
 City Falls Church State VA Zip Code 22046  
 Date of Receipt: 04 / 26 / 2012  
**Transaction ID : SA11AI.6560**  
 Amount of Each Receipt this Period: 72.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: DCI Group LLC Occupation: Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date: 288.00

**B. Stacey Chamberlain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 S Virginia Ave  
 City Falls Church State VA Zip Code 22046  
 Date of Receipt: 05 / 31 / 2012  
**Transaction ID : SA11AI.6561**  
 Amount of Each Receipt this Period: 72.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: DCI Group LLC Occupation: Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date: 360.00

**C. Stacey Chamberlain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 S Virginia Ave  
 City Falls Church State VA Zip Code 22046  
 Date of Receipt: 06 / 29 / 2012  
**Transaction ID : SA11AI.6562**  
 Amount of Each Receipt this Period: 72.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: DCI Group LLC Occupation: Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date: 432.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 216.00  
**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 9 OF 33
	(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)  
**DCI PAC**

Full Name (Last, First, Middle Initial)  
**A. Daniel Combs**

Mailing Address 1703 Asoleado Lane

City Vienna State VA Zip Code 22182

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

Name of Employer DCI Group LLC Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2012**

**Transaction ID : SA11AI.6563**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**B. Daniel Combs**

Mailing Address 1703 Asoleado Lane

City Vienna State VA Zip Code 22182

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

Name of Employer DCI Group LLC Occupation Executive

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  
**05 / 31 / 2012**

**Transaction ID : SA11AI.6564**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**C. Daniel Combs**

Mailing Address 1703 Asoleado Lane

City Vienna State VA Zip Code 22182

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

Name of Employer DCI Group LLC Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 29 / 2012**

**Transaction ID : SA11AI.6565**

Amount of Each Receipt this Period  
**200.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **600.00**

**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 10 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Frank Craddock**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 E. St. NE  
 City Washington State DC Zip Code 20002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DCI Group LLC Occupation Executive  
 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  
 05 / 31 / 2012  
**Transaction ID : SA11AI.6567**  
 Amount of Each Receipt this Period  
 50.00

**B. Frank Craddock**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 E. St. NE  
 City Washington State DC Zip Code 20002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DCI Group LLC Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11AI.6568**  
 Amount of Each Receipt this Period  
 50.00

**C. Jennifer Cutler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1805 Kenwood Ave  
 City Alexandria State VA Zip Code 22302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DCI Group LLC Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2012  
**Transaction ID : SA11AI.6569**  
 Amount of Each Receipt this Period  
 80.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 33
	<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)  
**DCI PAC**

Full Name (Last, First, Middle Initial) <b>A. Jennifer Cutler</b>		Date of Receipt
Mailing Address 1805 Kenwood Ave		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.6570</b>
Name of Employer DCI Group LLC		Amount of Each Receipt this Period
Occupation Executive		<input type="text" value="80.00"/>
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>B. Jennifer Cutler</b>		Date of Receipt
Mailing Address 1805 Kenwood Ave		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.6571</b>
Name of Employer DCI Group LLC		Amount of Each Receipt this Period
Occupation Executive		<input type="text" value="80.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="480.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Ebonie Hall</b>		Date of Receipt
Mailing Address P.O. Box 853		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Bowie	State MD	Zip Code 20718
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.6575</b>
Name of Employer DCI Group LLC		Amount of Each Receipt this Period
Occupation Executive		<input type="text" value="72.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="288.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="232.00"/>
<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 12 OF 33
	<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)  
**DCI PAC**

Full Name (Last, First, Middle Initial) <b>A. Ebonie Hall</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.6576</b>
Mailing Address P.O. Box 853		Amount of Each Receipt this Period 72.00
City Bowie	State MD	Zip Code 20718
FEC ID number of contributing federal political committee. C		
Name of Employer DCI Group LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B. Ebonie Hall</b>		Date of Receipt MM / DD / YYYY 06 / 29 / 2012 <b>Transaction ID : SA11AI.6577</b>
Mailing Address P.O. Box 853		Amount of Each Receipt this Period 72.00
City Bowie	State MD	Zip Code 20718
FEC ID number of contributing federal political committee. C		
Name of Employer DCI Group LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.00	

Full Name (Last, First, Middle Initial) <b>C. Sheldon Jay Hauck</b>		Date of Receipt MM / DD / YYYY 04 / 26 / 2012 <b>Transaction ID : SA11AI.6578</b>
Mailing Address 5603 Chevy Chase Pkwy NW		Amount of Each Receipt this Period 80.00
City Washington	State DC	Zip Code 20015
FEC ID number of contributing federal political committee. C		
Name of Employer DCI Group LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	224.00
<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 33
	<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)  
**DCI PAC**

Full Name (Last, First, Middle Initial)  
**A. Sheldon Jay Hauck**

Mailing Address 5603 Chevy Chase Pkwy NW

City Washington	State DC	Zip Code 20015
--------------------	-------------	-------------------

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

Name of Employer DCI Group LLC	Occupation Executive
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 31 / 2012**

**Transaction ID : SA11AI.6579**

Amount of Each Receipt this Period  
**80.00**

Full Name (Last, First, Middle Initial)  
**B. Sheldon Jay Hauck**

Mailing Address 5603 Chevy Chase Pkwy NW

City Washington	State DC	Zip Code 20015
--------------------	-------------	-------------------

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

Name of Employer DCI Group LLC	Occupation Executive
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2012**

**Transaction ID : SA11AI.6580**

Amount of Each Receipt this Period  
**80.00**

Full Name (Last, First, Middle Initial)  
**C. Timothy N Hyde**

Mailing Address 9062 Tower House Place

City Alexandria	State VA	Zip Code 22308
--------------------	-------------	-------------------

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

Name of Employer DCI Group LLC	Occupation Executive
-----------------------------------	-------------------------

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  
**04 / 26 / 2012**

**Transaction ID : SA11AI.6584**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>410.00</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 14 OF 33
	<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)  
**DCI PAC**

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

Mailing Address 9062 Tower House Place

City Alexandria State VA Zip Code 22308

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

Name of Employer DCI Group LLC Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2012  
**Transaction ID : SA11AI.6585**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Timothy N Hyde**

Mailing Address 9062 Tower House Place

City Alexandria State VA Zip Code 22308

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

Name of Employer DCI Group LLC Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11AI.6586**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Diane Laviolette**

Mailing Address 11309 Woodson Ave

City Kensington State MD Zip Code 20895

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

Name of Employer DCI Group LLC Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11AI.6596**

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 540.00

**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 15 OF 33
	<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)  
**DCI PAC**

**A. Madelyn M. Lawson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 225 Briggs St.  
 City Harrisburg State PA Zip Code 17102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DCI Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2012  
**Transaction ID : SA11AI.6651**  
 Amount of Each Receipt this Period  
 46.00

**B. Madelyn M. Lawson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 225 Briggs St.  
 City Harrisburg State PA Zip Code 17102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DCI Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11AI.6652**  
 Amount of Each Receipt this Period  
 46.00

**C. Brian S McCabe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 157 Shaker Road  
 City Canterbury State NH Zip Code 03224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DCI Group LLC Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2012  
**Transaction ID : SA11AI.6604**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	342.00
<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 16 OF 33
	<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)  
**DCI PAC**

**A. Brian S McCabe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 157 Shaker Road  
 City Canterbury State NH Zip Code 03224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DCI Group LLC Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2012  
**Transaction ID : SA11AI.6605**  
 Amount of Each Receipt this Period  
 250.00

**B. Brian S McCabe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 157 Shaker Road  
 City Canterbury State NH Zip Code 03224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DCI Group LLC Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11AI.6606**  
 Amount of Each Receipt this Period  
 250.00

**C. Catherine McCullough**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 108 SouthWood Ave  
 City Silver Springs State MD Zip Code 20901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DCI Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11AI.6610**  
 Amount of Each Receipt this Period  
 80.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	580.00
<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: PAGE 17 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Andrew O'Brien**

Mailing Address 5301 Marilyn Drive

City State Zip Code  
Bethesda MD 20816

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

Name of Employer Occupation  
DCI Executive

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2012  
**Transaction ID : SA11AI.6612**

Amount of Each Receipt this Period  
80.00

Full Name (Last, First, Middle Initial)  
**B. Andrew O'Brien**

Mailing Address 5301 Marilyn Drive

City State Zip Code  
Bethesda MD 20816

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

Name of Employer Occupation  
DCI Executive

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  
 05 / 31 / 2012  
**Transaction ID : SA11AI.6613**

Amount of Each Receipt this Period  
80.00

Full Name (Last, First, Middle Initial)  
**C. Andrew O'Brien**

Mailing Address 5301 Marilyn Drive

City State Zip Code  
Bethesda MD 20816

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

Name of Employer Occupation  
DCI Executive

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11AI.6614**

Amount of Each Receipt this Period  
80.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 240.00

**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 33
	<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)  
**DCI PAC**

Full Name (Last, First, Middle Initial) <b>A. Amanda O'Malley</b>			Date of Receipt MM / DD / YYYY 04 / 26 / 2012 <b>Transaction ID : SA11AI.6615</b>
Mailing Address 23 Spindrifft Way			Amount of Each Receipt this Period 100.00
City Annapolis	State MD	Zip Code 21403	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00	
Name of Employer DCI Group LLC		Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Amanda O'Malley</b>			Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.6616</b>
Mailing Address 23 Spindrifft Way			Amount of Each Receipt this Period 100.00
City Annapolis	State MD	Zip Code 21403	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00	
Name of Employer DCI Group LLC		Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Amanda O'Malley</b>			Date of Receipt MM / DD / YYYY 06 / 29 / 2012 <b>Transaction ID : SA11AI.6617</b>
Mailing Address 23 Spindrifft Way			Amount of Each Receipt this Period 100.00
City Annapolis	State MD	Zip Code 21403	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 600.00	
Name of Employer DCI Group LLC		Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<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 33
	<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)  
**DCI PAC**

Full Name (Last, First, Middle Initial)  
**A. Edwin Patru**

Mailing Address 3449 Sun Up Way

City Alexandria	State VA	Zip Code 22309
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FEC ID number of contributing federal political committee. **C**

Name of Employer DCI Group LLC	Occupation Executive
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2012  
**Transaction ID : SA11AI.6621**

Amount of Each Receipt this Period  
70.00

Full Name (Last, First, Middle Initial)  
**B. Edwin Patru**

Mailing Address 3449 Sun Up Way

City Alexandria	State VA	Zip Code 22309
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FEC ID number of contributing federal political committee. **C**

Name of Employer DCI Group LLC	Occupation Executive
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2012  
**Transaction ID : SA11AI.6622**

Amount of Each Receipt this Period  
70.00

Full Name (Last, First, Middle Initial)  
**C. Edwin Patru**

Mailing Address 3449 Sun Up Way

City Alexandria	State VA	Zip Code 22309
--------------------	-------------	-------------------

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

Name of Employer DCI Group LLC	Occupation Executive
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2012  
**Transaction ID : SA11AI.6623**

Amount of Each Receipt this Period  
70.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210.00
<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 20 OF 33
	<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)  
**DCI PAC**

Full Name (Last, First, Middle Initial) <b>A. Susan Reiche</b>		Date of Receipt MM / DD / YYYY 04 / 26 / 2012 <b>Transaction ID : SA11AI.6624</b>
Mailing Address 11 Knollwood Trail East		Amount of Each Receipt this Period 100.00
City Mendham	State NJ	Zip Code 07945
FEC ID number of contributing federal political committee. C		
Name of Employer DCI Group LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Susan Reiche</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.6625</b>
Mailing Address 11 Knollwood Trail East		Amount of Each Receipt this Period 100.00
City Mendham	State NJ	Zip Code 07945
FEC ID number of contributing federal political committee. C		
Name of Employer DCI Group LLC	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. Susan Reiche</b>		Date of Receipt MM / DD / YYYY 06 / 29 / 2012 <b>Transaction ID : SA11AI.6626</b>
Mailing Address 11 Knollwood Trail East		Amount of Each Receipt this Period 100.00
City Mendham	State NJ	Zip Code 07945
FEC ID number of contributing federal political committee. C		
Name of Employer DCI Group LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<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 33
	<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)  
**DCI PAC**

Full Name (Last, First, Middle Initial)  
**A. Kelly Robertson**

Mailing Address 616 S Fairfax St.

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

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

Name of Employer DCI Group LLC	Occupation Executive
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2012

**Transaction ID : SA11AI.6628**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**B. Kelly Robertson**

Mailing Address 616 S Fairfax St.

City Alexandria	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C**

Name of Employer DCI Group LLC	Occupation Executive
-----------------------------------	-------------------------

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
05	/	31	/	2012

**Transaction ID : SA11AI.6629**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**C. Kelly Robertson**

Mailing Address 616 S Fairfax St.

City Alexandria	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C**

Name of Employer DCI Group LLC	Occupation Executive
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2012

**Transaction ID : SA11AI.6630**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 22 OF 33
	<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)  
**DCI PAC**

**A. Paul Ryan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1111 Army - Navy Dr. #1007

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

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

Name of Employer DCI Group LLC	Occupation Executive
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
336.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2012

**Transaction ID : SA11AI.6634**

Amount of Each Receipt this Period  
84.00

**B. Paul Ryan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1111 Army - Navy Dr. #1007

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

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

Name of Employer DCI Group LLC	Occupation Executive
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2012

**Transaction ID : SA11AI.6635**

Amount of Each Receipt this Period  
84.00

**C. Paul Ryan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1111 Army - Navy Dr. #1007

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

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

Name of Employer DCI Group LLC	Occupation Executive
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
504.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2012

**Transaction ID : SA11AI.6636**

Amount of Each Receipt this Period  
84.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	252.00
<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 23 OF 33
	<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)  
**DCI PAC**

Full Name (Last, First, Middle Initial)  
**A. Craig Stevens**

Mailing Address 613 F St. NE

City Washington State DC Zip Code 20002

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

Name of Employer DCI Group LLC Occupation Executive

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  
 04 / 26 / 2012

**Transaction ID : SA11AI.6641**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Craig Stevens**

Mailing Address 613 F St. NE

City Washington State DC Zip Code 20002

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

Name of Employer DCI Group LLC Occupation Executive

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  
 05 / 31 / 2012

**Transaction ID : SA11AI.6642**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. Craig Stevens**

Mailing Address 613 F St. NE

City Washington State DC Zip Code 20002

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

Name of Employer DCI Group LLC Occupation Executive

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  
 06 / 29 / 2012

**Transaction ID : SA11AI.6643**

Amount of Each Receipt this Period  
100.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 33
	<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)  
**DCI PAC**

Full Name (Last, First, Middle Initial) <b>A. Douglas Stewart</b>		Date of Receipt MM / DD / YYYY 06 / 04 / 2012 <b>Transaction ID : SA11AI.6552</b>
Mailing Address 8433 Caldbeck Dr.		Amount of Each Receipt this Period 500.00
City Raleigh	State NC	Zip Code 27615
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer The Stewart Group Inc	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Miriam Warren</b>		Date of Receipt MM / DD / YYYY 04 / 26 / 2012 <b>Transaction ID : SA11AI.6644</b>
Mailing Address 1619 R Street NW # 405		Amount of Each Receipt this Period 72.00
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 288.00
Name of Employer DCI Group LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Miriam Warren</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 <b>Transaction ID : SA11AI.6645</b>
Mailing Address 1619 R Street NW # 405		Amount of Each Receipt this Period 72.00
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 360.00
Name of Employer DCI Group LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	644.00
<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: PAGE 25 OF 33  
(check only one)

<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)  
**DCI PAC**

**A. Miriam Warren**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1619 R Street NW # 405  
City Washington State DC Zip Code 20009  
FEC ID number of contributing federal political committee. **C**  
Name of Employer DCI Group LLC Occupation Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 432.00

Date of Receipt 06 / 29 / 2012  
**Transaction ID : SA11AI.6646**  
Amount of Each Receipt this Period 72.00

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

Date of Receipt  
Amount of Each Receipt this Period

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

Date of Receipt  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	72.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6992.00

**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)  
**DCI PAC**

Full Name (Last, First, Middle Initial)

**A. DCI Group, LLC**

Mailing Address 1828 L St. NW  
Ste 400

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Web Mtc March

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2012

**Transaction ID : SB21B.6660**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. DCI Group, LLC**

Mailing Address 1828 L St. NW  
Ste 400

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Rent April

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2012

**Transaction ID : SB21B.6662**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. DCI Group, LLC**

Mailing Address 1828 L St. NW  
Ste 400

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Web Hosting April

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2012

**Transaction ID : SB21B.6661**

Amount of Each Disbursement this Period

250.00

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

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

1000.00

**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)  
**DCI PAC**

Full Name (Last, First, Middle Initial)  
**A. DCI Group, LLC**

Date of Disbursement: MM / DD / YYYY  
06 / 05 / 2012

Mailing Address 1828 L St. NW  
Ste 400

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Rent April

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID : **SB21B.6663**

Amount of Each Disbursement this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Patton Boggs**

Date of Disbursement: MM / DD / YYYY  
06 / 04 / 2012

Mailing Address 2550 M St. NW

City Washington State DC Zip Code 20037

Purpose of Disbursement  
April Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID : **SB21B.6659**

Amount of Each Disbursement this Period  
260.00

Full Name (Last, First, Middle Initial)  
**C. Star Financial Management LLC**

Date of Disbursement: MM / DD / YYYY  
04 / 30 / 2012

Mailing Address 20118 N 67th Ave  
Ste 300-615

City Glendale State AZ Zip Code 85308

Purpose of Disbursement  
April Accounting Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID : **SB21B.6656**

Amount of Each Disbursement this Period  
275.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1035.00

**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)  
**DCI PAC**

Full Name (Last, First, Middle Initial)

**A. Star Financial Management LLC**

Mailing Address 20118 N 67th Ave  
Ste 300-615

City Glendale State AZ Zip Code 85308

Purpose of Disbursement  
May Accounting Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6657**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Star Financial Management LLC**

Mailing Address 20118 N 67th Ave  
Ste 300-615

City Glendale State AZ Zip Code 85308

Purpose of Disbursement  
June Accounting fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6658**

Amount of Each Disbursement this Period

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

/  /

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

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

Full Name (Last, First, Middle Initial)

**A. Berg for Senate**

Mailing Address PO BOX 9394

City FARGO State ND Zip Code 58106

Purpose of Disbursement  
Contribution

Candidate Name  
**RICHARD A BERG**

Office Sought:  House  
 Senate  
 President  
State: ND District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	2

**Transaction ID : SB23.6664**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF MARY LANDRIEU INC**

Mailing Address 607 14TH STREET NW SUITE 800  
SUITE 1434

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name  
**MARY L LANDRIEU**

Office Sought:  House  
 Senate  
 President  
State: LA District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	2

**Transaction ID : SB23.6669**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. HOYER FOR CONGRESS**

Mailing Address 607 14th Street, NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name  
**STENY HAMILTON HOYER**

Office Sought:  House  
 Senate  
 President  
State: MD District: 05

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	2

**Transaction ID : SB23.6677**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

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

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

4	0	0	0	0	0	0	0	0	0

0	0	0	0	0	0	0	0	0	0

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.6677

This was an input error. It should have been input as General versus Primary

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. KELLY PAC**

Mailing Address 901 N WASHINGTON STREET  
SUITE 102

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Contribution

Candidate Name  
**KELLY A AYOTTE**

Office Sought:  House  
 Senate  
 President  
State: NH District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2012

**Transaction ID : SB23.6675**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MANCHIN FOR WEST VIRGINIA**

Mailing Address PO BOX 5202

City CHARLESTON State WV Zip Code 25361

Purpose of Disbursement  
Contribution

Candidate Name  
**JOE, III MANCHIN**

Office Sought:  House  
 Senate  
 President  
State: WV District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2012

**Transaction ID : SB23.6680**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. MARY BONO MACK COMMITTEE**

Mailing Address PO BOX 3370

City PALM SPRINGS State CA Zip Code 92263

Purpose of Disbursement  
Contribution

Candidate Name  
**MARY BONO MACK**

Office Sought:  House  
 Senate  
 President  
State: CA District: 36

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 13 / 2012

**Transaction ID : SB23.6678**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.6678

This was an input error. Should have been listed as General versus Primary

Form/Schedule:

Transaction ID:



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. SCOTT BROWN FOR US SENATE COMMITTEE INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2012

Mailing Address P.O. BOX 395

**Transaction ID : SB23.6667**

City State Zip Code  
WRENTHAM MA 02903

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name

**SCOTT P BROWN**

Office Sought:  House  
 Senate  
 President  
State: MA District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. SCOTT GARRETT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2012

Mailing Address P.O. Box 905

**Transaction ID : SB23.6672**

City State Zip Code  
Newton NJ 07860

Amount of Each Disbursement this Period

1500.00
---------

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name

**SCOTT REP. GARRETT**

Office Sought:  House  
 Senate  
 President  
State: NJ District: 05

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

2500.00
---------

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

9500.00
---------