

A. Form/Schedule : **F3XN**

Transaction ID :

For the 2009-2010 election cycle, please note that services provided by Koch & Hoos LLC are inclusive of personnel and office overhead to include rent, supplies, telephone service, utilities, and office equipment. Committee management is provided on a volunteer basis. Additionally, all PAC administrative expenses are accurately reflected on the disclosure report and no expenses were incurred on behalf of a candidate or candidate committee, unless otherwise noted.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Alliance PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		1663.78
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	1663.78									
(c) Total Receipts (from Line 19)	3500.00	3500.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5163.78	5163.78								
7. Total Disbursements (from Line 31)	3638.50	3638.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1525.28	1525.28								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Alliance PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
0	3

Y	Y	Y	Y
2	0	0	9

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)	3500.00	3500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3500.00	3500.00
(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)	3500.00	3500.00
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 Transfer (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))	3500.00	3500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3500.00	3500.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	638.50	638.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	638.50	638.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	3000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	3638.50	3638.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3638.50	3638.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	3500.00	3500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3500.00	3500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	638.50	638.50
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	638.50	638.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 11
(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

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)
Alliance PAC

A.

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

Mailing Address 4611 Hawthorne Ln NW

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. C

Name of Employer
American Continental Group LLC

Occupation
Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
03 / 06 / 2009

Transaction ID: SA11AI.4176

Amount of Each Receipt this Period
1500.00

Contribution

B.

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

Mailing Address 4611 Hawthorne Ln NW

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. C

Name of Employer
American Continental Group LLC

Occupation
Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
04 / 08 / 2009

Transaction ID: SA11AI.4177

Amount of Each Receipt this Period
1000.00

Contribution

C.

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

Mailing Address 4611 Hawthorne Ln NW

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. C

Name of Employer
American Continental Group LLC

Occupation
Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
06 / 30 / 2009

Transaction ID: SA11AI.4194

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional) 3000.00

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 8 / 11	
	(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"/> 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)
Alliance PAC

A.

Full Name (Last, First, Middle Initial)
Carlyle P. Thorsen

Mailing Address 3906 Aspen St

City	State	Zip Code
Chevy Chase	MD	20815

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

Name of Employer American Continental Group	Occupation Lobbyist
--	------------------------

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	4	/	2	0	0	9

Transaction ID: SA11AI.4183

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	3500.00

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)
Alliance PAC

A.

Full Name (Last, First, Middle Initial)
Koch & Hoos LLC

Transaction ID: SB21B.4178
Date of Disbursement

Mailing Address 901 N Washington St, Ste 102

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	9

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC Accounting Services

--

268.50

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Koch & Hoos LLC

Transaction ID: SB21B.4182
Date of Disbursement

Mailing Address 901 N Washington St, Ste 102

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	9

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC Accounting Services

--

276.25

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

544.75

TOTAL This Period (last page this line number only) ►

544.75

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 11

<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)
Alliance PAC

<p>A. Full Name (Last, First, Middle Initial) CITIZENS FOR ALTMIRE</p> <p>Mailing Address P.O. Box 1776</p> <p>City Freedom State PA Zip Code 15042</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name JASON ALTMIRE <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 04</p>	<p>Transaction ID: SB23.4179 Date of Disbursement 04 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B. Full Name (Last, First, Middle Initial) CONYERS FOR CONGRESS</p> <p>Mailing Address 1031 N. Edgewood St.</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name JOHN JR. CONYERS <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 14</p>	<p>Transaction ID: SB23.4185 Date of Disbursement 06 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) GILLIBRAND FOR SENATE</p> <p>Mailing Address 313 C STREET NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name KIRSTEN ELIZABETH GILLIBRAND <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 00</p>	<p>Transaction ID: SB23.4191 Date of Disbursement 06 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional)	1500.00
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 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)
Alliance PAC

A.	Full Name (Last, First, Middle Initial) HIGGINS FOR CONGRESS	Transaction ID: SB23.4171
	Mailing Address PO BOX 28	Date of Disbursement MM / DD / YYYY 02 / 05 / 2009
	City BUFFALO State NY Zip Code 14220	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name BRIAN HIGGINS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 27	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HIGGINS FOR CONGRESS	Transaction ID: SB23.4175
	Mailing Address PO BOX 28	Date of Disbursement MM / DD / YYYY 02 / 10 / 2009
	City BUFFALO State NY Zip Code 14220	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name BRIAN HIGGINS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 27	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WELCH FOR CONGRESS	Transaction ID: SB23.4188
	Mailing Address PO BOX 1682	Date of Disbursement MM / DD / YYYY 06 / 16 / 2009
	City BURLINGTON State VT Zip Code 05402	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name PETER WELCH	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	3000.00