

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
The Eye of the Tiger Political Action Committee

ADDRESS (number and street) PO Box 2485  
 Check if different than previously reported. (ACC)  
Springfield VA 22152-0485

2. **FEC IDENTIFICATION NUMBER** C00467431  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2010 through 09 30 2010

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

Type or Print Name of Treasurer Robert F. Carlin

Signature of Treasurer Electronically Filed by Robert F. Carlin Date 12 02 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
The Eye of the Tiger Political Action Committee

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		40619.33
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	18201.27									
(c) Total Receipts (from Line 19) .....	9000.00	21250.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	27201.27	61869.33								
7. Total Disbursements (from Line 31) .....	23936.20	58604.26								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3265.07	3265.07								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
The Eye of the Tiger Political Action Committee

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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) .....	6500.00	8150.00
(ii) Unitemized .....	0.00	300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	6500.00	8450.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2500.00	12800.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9000.00	21250.00
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)) .....	9000.00	21250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9000.00	21250.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	3936.20	31604.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3936.20	31604.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	27000.00
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))..	23936.20	58604.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23936.20	58604.26

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	9000.00	21250.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9000.00	21250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3936.20	31604.26
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3936.20	31604.26

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 21

(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)  
The Eye of the Tiger Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Bob Brooks

Mailing Address 1107 N Pitt Street  
Unit 2C

City State Zip Code  
Alexandria VA 22314-1430

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

Name of Employer Occupation  
Alpine Group Government Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 8 / 2 0 1 0

Transaction ID: SA11AI-216-167-c

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. L.Lane Grigsby

Mailing Address PO Box 104

City State Zip Code  
Baton Rouge LA 70821-0104

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

Name of Employer Occupation  
Cajun Constructors, Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 9 / 2 0 1 0

Transaction ID: SA11AI-8-146-c

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. William Robinson

Mailing Address 755 Baywood Drive  
Suite 180

City State Zip Code  
Petaluma CA 94954-5509

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 ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 9 / 2 0 1 0

Transaction ID: SA11AI-206-160-c

Amount of Each Receipt this Period

5000.00

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

6500.00

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

6500.00

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

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

FOR LINE NUMBER: PAGE 7 / 21  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Eye of the Tiger Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
Comcast Corporation Political Action Committee- Federal

Mailing Address 1701 John F Kennedy Boulevard

City State Zip Code  
Philadelphia PA 19103-2838

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2010

Transaction ID: SA11C-205-159-c

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2500.00

**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)  
The Eye of the Tiger Political Action Committee

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B-74-168-e Date of Disbursement
	Mailing Address PO Box 36647 - 1CR	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel: Airline Fare	<input type="text" value="259.40"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B-74-169-e Date of Disbursement
	Mailing Address PO Box 36647 - 1CR	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel: Airline Fare	<input type="text" value="225.40"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB21B-74-170-e Date of Disbursement
	Mailing Address PO Box 36647 - 1CR	<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel: Airline Fare	<input type="text" value="225.40"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="710.20"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)

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<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)  
The Eye of the Tiger Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Southwest Airlines

Mailing Address PO Box 36647 - 1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel: Airline Fare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B-74-171-e  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**B.**

Full Name (Last, First, Middle Initial)  
The Levatino Group

Mailing Address 2501 Wisconsin Avenue NW Suite 304

City Washington State DC Zip Code 20007-4542

Purpose of Disbursement  
Fundraising: Food/Beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B-53-145-e  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

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

**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)  
The Eye of the Tiger Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Andy Barr For Congress, Inc.  Mailing Address PO Box 2059  City Lexington State KY Zip Code 40588-2059  Purpose of Disbursement Committee Contribution Candidate Name Garland "Andy" Barr  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 06  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-155-132-e Date of Disbursement 07 / 20 / 2010  Amount of Each Disbursement this Period 500.00  011 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Bass Victory Committee  Mailing Address PO Box 3451  City Concord State NH Zip Code 03302-3451  Purpose of Disbursement Committee Contribution Candidate Name Charles F. Bass  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02  Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	Transaction ID: SB23-213-165-e Date of Disbursement 09 / 30 / 2010  Amount of Each Disbursement this Period 1000.00  011 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Benishek For Congress  Mailing Address 802 Pentoga Trail  City Crystal Falls State MI Zip Code 49920-8518  Purpose of Disbursement Committee Contribution Candidate Name Daniel J Benishek  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-215-152-e Date of Disbursement 09 / 13 / 2010  Amount of Each Disbursement this Period 500.00  011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)  
The Eye of the Tiger Political Action Committee

A.	Full Name (Last, First, Middle Initial) Canseco For Congress	Transaction ID: SB23-204-158-e Date of Disbursement
	Mailing Address 10004 Wurzbach Road # 366	<input type="text" value="09"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City San Antonio State TX Zip Code 78230-2214	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Francisco 'Quico' Canseco	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chris Gibson For Congress	Transaction ID: SB23-200-156-e Date of Disbursement
	Mailing Address PO Box 53	<input type="text" value="09"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Hudson State NY Zip Code 12534-0053	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Christopher Patrick Gibson	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Crawford For Congress	Transaction ID: SB23-143-126-e Date of Disbursement
	Mailing Address PO Box 16956	<input type="text" value="07"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Jonesboro State AR Zip Code 72403-6716	Amount of Each Disbursement this Period
	Purpose of Disbursement Committee Contribution	<input type="text" value="500.00"/>
	Candidate Name Eric Alan Rick Crawford	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 12 / 21

<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)  
The Eye of the Tiger Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Daniel Webster For Congress</p> <p>Mailing Address 3400 Old Winter Garden Road</p> <p>City Orlando State FL Zip Code 32805-1134</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name Daniel Webster</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 08</p>	<p><b>Transaction ID:</b> SB23-186-149-e</p> <p>Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Dold For Congress</p> <p>Mailing Address PO Box 8145</p> <p>City Northfield State IL Zip Code 60093-8145</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name Mr. Robert James Dold Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 10</p>	<p><b>Transaction ID:</b> SB23-147-128-e</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Fimian For Congress 2010 (fimian 2010)</p> <p>Mailing Address PO Box 3131</p> <p>City Oakton State VA Zip Code 22124-9131</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name Keith S Fimian</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: VA District: 11</p>	<p><b>Transaction ID:</b> SB23-173-141-e</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</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)  
The Eye of the Tiger Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
Fitzpatrick For Congress

Transaction ID: SB23-163-136-e  
Date of Disbursement

Mailing Address PO Box 185

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

City Langhorne State PA Zip Code 19047-0185

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Committee Contribution

011  
Category/  
Type

Candidate Name  
Michael G Fitzpatrick

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: PA District: 08

B.

Full Name (Last, First, Middle Initial)  
Friends Of David Harmer

Transaction ID: SB23-145-127-e  
Date of Disbursement

Mailing Address 9321 Silverbend Lane

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

City Elk Grove State CA Zip Code 95624-3985

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Committee Contribution

011  
Category/  
Type

Candidate Name  
David Jeffrey Harmer

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: CA District: 11

C.

Full Name (Last, First, Middle Initial)  
Friends Of Joe Heck

Transaction ID: SB23-157-133-e  
Date of Disbursement

Mailing Address PO Box 750114

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

City Las Vegas State NV Zip Code 89136-0114

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Committee Contribution

011  
Category/  
Type

Candidate Name  
Joe Heck

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: NV District: 03

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

1500.00
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TOTAL This Period (last page this line number only) .....

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**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 14 / 21

<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)  
The Eye of the Tiger Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
Friends Of Nan Hayworth

Transaction ID: SB23-198-155-e  
Date of Disbursement

Mailing Address PO Box 189

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	0

City State Zip Code  
Mount Kisco NY 10549-0189

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Committee Contribution

011
-----

Category/  
Type

Candidate Name  
Nan Hayworth

Office Sought:  House  
 Senate  
 President  
State: NY District: 19

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Friends Of Todd Young

Transaction ID: SB23-153-131-e  
Date of Disbursement

Mailing Address PO Box 1053

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

City State Zip Code  
Bloomington IN 47402-1053

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Committee Contribution

011
-----

Category/  
Type

Candidate Name  
Todd Christopher Young

Office Sought:  House  
 Senate  
 President  
State: IN District: 09

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Graves For Congress

Transaction ID: SB23-141-125-e  
Date of Disbursement

Mailing Address PO Box 701

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	0

City State Zip Code  
Gainesville GA 30503-0701

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
Committee Contribution

011
-----

Category/  
Type

Candidate Name  
John Thomas Graves, Jr.

Office Sought:  House  
 Senate  
 President  
State: GA District: 09

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

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

1250.00

**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)

PAGE 15 / 21

<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)  
The Eye of the Tiger Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jon Runyan For Congress, Inc	Transaction ID: SB23-196-154-e
	Mailing Address PO Box 225	Date of Disbursement 09 / 13 / 2010
	City Colonia State NJ Zip Code 07067-0225	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Committee Contribution	011 Category/ Type
	Candidate Name Jon Runyan	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NJ District: 03	

B.	Full Name (Last, First, Middle Initial) Kinzinger For Congress	Transaction ID: SB23-149-129-e
	Mailing Address PO Box 1050	Date of Disbursement 07 / 20 / 2010
	City Bourbonnais State IL Zip Code 60914-7050	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Committee Contribution	011 Category/ Type
	Candidate Name Adam Kinzinger	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IL District: 11	

C.	Full Name (Last, First, Middle Initial) Kristi For Congress	Transaction ID: SB23-167-138-e
	Mailing Address PO Box 852	Date of Disbursement 07 / 20 / 2010
	City Sioux Falls State SD Zip Code 57101-0852	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Committee Contribution	011 Category/ Type
	Candidate Name Kristi Lynn Noem	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: SD District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1500.00
<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)

PAGE 16 / 21

<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)  
The Eye of the Tiger Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Landry for Louisiana <hr/> Mailing Address PO Box 13816 <hr/> City New Iberia State LA Zip Code 70562-3816 <hr/> Purpose of Disbursement Non Federal Donation Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	Transaction ID: SB23-209-162-e Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special
<b>B.</b> Full Name (Last, First, Middle Initial) Mccoy For House <hr/> Mailing Address PO Box 13826 <hr/> City Charleston State SC Zip Code 29422-3826 <hr/> Purpose of Disbursement State Committee Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	Transaction ID: SB23-178-144-e Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special
<b>C.</b> Full Name (Last, First, Middle Initial) Mckinley For Congress <hr/> Mailing Address 32 20th Street <hr/> City Wheeling State WV Zip Code 26003-3746 <hr/> Purpose of Disbursement Committee Contribution Candidate Name David B Mckinley <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-175-142-e Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3250.00

**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)  
The Eye of the Tiger Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mike Kelly For Congress</p> <p>Mailing Address PO Box 476</p> <p>City Lyndora State PA Zip Code 16045-0476</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name George J Kelly, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: PA District: 03</p>	<p><b>Transaction ID:</b> SB23-202-157-e <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="500.00"/></p> <p><input type="text" value="011"/> Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mobrooksforcongress.Com</p> <p>Mailing Address 7610 Foxfire Drive SE</p> <p>City Huntsville State AL Zip Code 35802-2716</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name Mo Brooks</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AL District: 05</p>	<p><b>Transaction ID:</b> SB23-182-147-e <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="500.00"/></p> <p><input type="text" value="011"/> Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mulvaney For Congress</p> <p>Mailing Address 9789 Charlotte Highway Suite 400-255</p> <p>City Indian Land State SC Zip Code 29707-7177</p> <p>Purpose of Disbursement Committee Contribution</p> <p>Candidate Name John Michael 'Mick' Mulvaney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: SC District: 05</p>	<p><b>Transaction ID:</b> SB23-165-137-e <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="500.00"/></p> <p><input type="text" value="011"/> Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
The Eye of the Tiger Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Nunnelee For Congress  Mailing Address PO Box 7092  City Tupelo State MS Zip Code 38802-7092  Purpose of Disbursement Committee Contribution Candidate Name Patrick Alan Nunnelee  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-208-161-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	1	0	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		3	0		2	0	1	0														
1000.00																							
<b>B.</b>	Full Name (Last, First, Middle Initial) Randy Hultgren For Congress  Mailing Address PO Box 39  City Batavia State IL Zip Code 60510-0039  Purpose of Disbursement Committee Contribution Candidate Name Randy Hultgren  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-151-130-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">500.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	0		2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		2	0		2	0	1	0														
500.00																							
<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Hurt For Congress  Mailing Address PO Box 2  City Chatham State VA Zip Code 24531-0002  Purpose of Disbursement Committee Contribution Candidate Name Robert Hurt  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-171-140-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">500.00</td> </tr> </table> 011 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	0		2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		2	0		2	0	1	0														
500.00																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td style="text-align: center;">2000.00</td> </tr> </table>	2000.00
2000.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td style="text-align: center;"> </td> </tr> </table>	

**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 19 / 21

<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)  
The Eye of the Tiger Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Sandy Adams For Congress <hr/> Mailing Address PO Box 1566 <hr/> City Orlando State FL Zip Code 32802-1566 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Sandy Adams <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-188-150-e Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Southerland For Congress <hr/> Mailing Address PO Box 1692 <hr/> City Lynn Haven State FL Zip Code 32444-6492 <hr/> Purpose of Disbursement Committee Contribution Candidate Name William Steve Southerland, II <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-184-148-e Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Steve Fincher For Congress <hr/> Mailing Address PO Box 11153 <hr/> City Jackson State TN Zip Code 38308-0119 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Steve Fincher <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-23-139-e Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" 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) ..... ▶

# 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)  
The Eye of the Tiger Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Tim Scott For Congress <hr/> Mailing Address 1405 Ashley River Road <hr/> City Charleston State SC Zip Code 29407-5305 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Timothy E Scott <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-177-143-e Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Tom Ganley For Congress <hr/> Mailing Address PO Box 41331 <hr/> City Brecksville State OH Zip Code 44141-0331 <hr/> Purpose of Disbursement Committee Congress Candidate Name Thomas D Ganley <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-161-135-e Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Tom Reed For Congress <hr/> Mailing Address 99 W 1st Street <hr/> City Corning State NY Zip Code 14830-2557 <hr/> Purpose of Disbursement Committee Contribution Candidate Name Thomas W Reed, II <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-159-134-e Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1500.00
<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)

PAGE 21 / 21

<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)  
The Eye of the Tiger Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Walberg For Congress Mailing Address 6769 Teachout Road City Tipton State MI Zip Code 49287-9807 Purpose of Disbursement Committee Contribution Candidate Name Timothy L. Walberg Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-194-153-e Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2010
	Amount of Each Disbursement this Period 500.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Yoder For Congress Mailing Address PO Box 26742 City Overland Park State KS Zip Code 66225-6742 Purpose of Disbursement Committee Contribution Candidate Name Kevin W Yoder Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23-190-151-e Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2010
	Amount of Each Disbursement this Period 500.00 Category/Type 011

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

1000.00

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

2000.00