

**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

Renewing Opportunity Trust and Hope PAC (ROTHPAC)

ADDRESS (number and street)

209 Pennsylvania Avenue Southeast

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00395871

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

Ms. Carrie Lea Bromeland

Signature of Treasurer

Electronically Filed by Ms. Carrie Lea Bromeland

Date

10

19

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)

A. Form/Schedule : **F3XA**

Transaction ID :

This amendment corrects a disbursement to Paychex reported in error as \$97.42. The actual amount is \$97.12. A disbursement to American Express on 9/3/10 for \$7.95 was accidentally left off the report. The amendment includes this disbursement.

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 13

Write or Type Committee Name

Renewing Opportunity Trust and Hope PAC (ROTHPAC)

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y 2010</span>		2184.41
(b) Cash on Hand at Beginning of Reporting Period .....	16951.07	
(c) Total Receipts (from Line 19) .....	5000.00	40800.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	21951.07	42984.41
7. Total Disbursements (from Line 31) .....	11488.75	32522.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10462.32	10462.32
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

### For further information contact:

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

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

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Renewing Opportunity Trust and Hope PAC (ROTHPAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	1	0

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	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	0.00	13300.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	13300.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	27500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	5000.00	40800.00
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)) .....	5000.00	40800.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5000.00	40800.00

## 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.....	5488.75	13522.09	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	5488.75	13522.09	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	18000.00	
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	1000.00	
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))..	11488.75	32522.09	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11488.75	32522.09	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	5000.00	40800.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5000.00	40800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5488.75	13522.09
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5488.75	13522.09

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 13

(check only one)

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

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)

Renewing Opportunity Trust and Hope PAC (ROTHPAC)

**A.**

Full Name (Last, First, Middle Initial)

BAE Systems Inc. Political Action Committee (BAE SYSTEMS USA PAC)

Mailing Address 1300 North 17th Street  
Suite 1400

City	State	Zip Code
Arlington	VA	22209

FEC ID number of contributing  
federal political committee.**C** C00281212

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11C.4870

Amount of Each Receipt this Period

5000.00

Contribution

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

5000.00

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

5000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 / 13

<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)

Renewing Opportunity Trust and Hope PAC (ROTHPAC)

**A.**

Full Name (Last, First, Middle Initial)

Carrie L. Bromeland

Mailing Address 533 12th Street NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
July Salary

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4874

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

Amount of Each Disbursement this Period

680.62

**B.**

Full Name (Last, First, Middle Initial)

Carrie L. Bromeland

Mailing Address 533 12th Street NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
August Salary

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4883

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	0

Amount of Each Disbursement this Period

680.62

**C.**

Full Name (Last, First, Middle Initial)

Carrie L. Bromeland

Mailing Address 533 12th Street NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
September Salary

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4887

Date of Disbursement

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

Amount of Each Disbursement this Period

680.62

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

2041.86

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)

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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)

Renewing Opportunity Trust and Hope PAC (ROTHPAC)

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) PayChex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Monthly Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4872</p> <p>Date of Disbursement 07 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 97.12</p> <p>Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) PayChex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Fed., State, Soc. Sec. &amp; Medicare Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4873</p> <p>Date of Disbursement 07 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 146.26</p> <p>Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) PayChex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement DC Admin Surcharge - SUI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4875</p> <p>Date of Disbursement 07 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 4.40</p> <p>Category/ Type</p>

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

247.78

**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)

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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)

Renewing Opportunity Trust and Hope PAC (ROTHPAC)

A.

Full Name (Last, First, Middle Initial)

PayChex

Mailing Address 3060 Williams Drive  
Suite 300

City State Zip Code  
Fairfax VA 22031

Purpose of Disbursement  
July Payroll Processing Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4880

Date of Disbursement

08 / 08 / 2010

Amount of Each Disbursement this Period

102.95

B.

Full Name (Last, First, Middle Initial)

PayChex

Mailing Address 3060 Williams Drive  
Suite 300

City State Zip Code  
Fairfax VA 22031

Purpose of Disbursement  
Fed., State, Soc. Sec. & Medicare Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4881

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

146.26

C.

Full Name (Last, First, Middle Initial)

PayChex

Mailing Address 3060 Williams Drive  
Suite 300

City State Zip Code  
Fairfax VA 22031

Purpose of Disbursement  
Payroll Processing Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4884

Date of Disbursement

09 / 09 / 2010

Amount of Each Disbursement this Period

97.12

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

346.33

**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 11 / 13

<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)

Renewing Opportunity Trust and Hope PAC (ROTHPAC)

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) PayChex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Fed., State, Soc. Sec. &amp; Medicare Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4886</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 146.26</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Dan Williams</p> <p>Mailing Address Cap. Hill Press Club Offices 209 Pennsylvania Avenue SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Rent, Phone DSL &amp; Cabel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4877</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 1982.95</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Dan Williams</p> <p>Mailing Address Cap. Hill Press Club Offices 209 Pennsylvania Avenue SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement July Phone &amp; Fax Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4882</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 6 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 158.44</p>

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

2287.65

**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 12 / 13

<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)

Renewing Opportunity Trust and Hope PAC (ROTHPAC)

**A.**

Full Name (Last, First, Middle Initial)

Dan Williams

Mailing Address Cap. Hill Press Club Offices  
209 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
August Phone & Fax Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4889

Date of Disbursement

09 / 29 / 2010

Amount of Each Disbursement this Period

45.54

**B.**

Full Name (Last, First, Middle Initial)

Dan Williams

Mailing Address Cap. Hill Press Club Offices  
209 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
October Rent, DSL, Cable & Phone Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4890

Date of Disbursement

09 / 29 / 2010

Amount of Each Disbursement this Period

495.74

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

541.28

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

5464.90

# **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 13 / 13

<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)

Renewing Opportunity Trust and Hope PAC (ROTHPAC)

**A.**

Full Name (Last, First, Middle Initial)

Adler For Congress

Mailing Address 14 Knightswood Drive

City  
Marlton

State  
NJ

Zip Code  
08053

Purpose of Disbursement  
2010 General Contribution

Candidate Name  
Adler For Congress

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 03

**Transaction ID:** SB23.4885

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)

Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street SE  
2nd Floor

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
2010 Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.4876

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**6000.00**

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

**6000.00**