

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Hoyer's Majority Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="2632.02"/>	<input type="text" value="2632.02"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2632.02"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="93100.00"/>	<input type="text" value="93100.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="95732.02"/>	<input type="text" value="95732.02"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="92021.27"/>	<input type="text" value="92021.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3710.75"/>	<input type="text" value="3710.75"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Hoyer's Majority Fund

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13600.00	13600.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	13600.00	13600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	79500.00	79500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	93100.00	93100.00
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	93100.00	93100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	93100.00	93100.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	11871.02	11871.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	11871.02	11871.02
22. Transfers to Affiliated/Other Party Committees.....	80150.25	80150.25
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	92021.27	92021.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	92021.27	92021.27

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	93100.00	93100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	93100.00	93100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11871.02	11871.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11871.02	11871.02

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 26
<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)
Hoyer's Majority Fund

A. Raj N. Shah
Full Name (Last, First, Middle Initial)

Mailing Address 18396 Fairway Oaks Sq

City Leesburg State VA Zip Code 20176-8460

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

Name of Employer CTIS, Inc. Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
05 / 13 / 2013
Transaction ID : C19966394

Amount of Each Receipt this Period
10000.00

B. Earl Pomeroy
Full Name (Last, First, Middle Initial)

Mailing Address 1044 Westwood Street

City Bismarck State ND Zip Code 58504

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

Name of Employer Alston & Bird, LLP Occupation Senior Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
05 / 23 / 2013
Transaction ID : C19970618

Amount of Each Receipt this Period
1000.00

C. Wiley Rein, LLP
Full Name (Last, First, Middle Initial)

Mailing Address 1776 K Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
06 / 05 / 2013
Transaction ID : C19977272

Amount of Each Receipt this Period
1300.00

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional).....▶ 12300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

A. Dorthula Powell-Woodson
Full Name (Last, First, Middle Initial)
Mailing Address 1776 K Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C**

Name of Employer Wiley Rein LLP	Occupation Partner
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		05		2013

Transaction ID : C19995870

Amount of Each Receipt this Period
400.00

[MEMO ITEM]
*

B. Wiley Rein, LLP
Full Name (Last, First, Middle Initial)
Mailing Address 1776 K Street, NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		05		2013

Transaction ID : C19977273

Amount of Each Receipt this Period
1300.00

PARTNERSHIP--partners below if itemized

C.
Full Name (Last, First, Middle Initial)
Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	13600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)
A. Council of Insurance Agents & Brokers PAC

Mailing Address 701 Pennsylvania Avenue, NW
Suite 750

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

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 Y
04 / 29 / 2013

Transaction ID : C19961380

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. UnitedHealth Group Inc. PAC

Mailing Address 9900 Bren Road East

City Minnetonka State MN Zip Code 55343

FEC ID number of contributing federal political committee. **C** C00274431

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 Y
06 / 06 / 2013

Transaction ID : C19977271

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. International Council of Shopping Centers Inc. PAC

Mailing Address 555 12th Street, NW, Suite 660

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00217638

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 Y
05 / 09 / 2013

Transaction ID : C19967031

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)
A. AbbVie PAC

Mailing Address 1 N. Waukegan Road

City North Chicago State IL Zip Code 60064

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2013
Transaction ID : C19977262

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. PAC of the American Association of Orthopaedic Surgeons

Mailing Address 317 Massachusetts Avenue, NE
First Floor

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2013
Transaction ID : C19961382

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Delta Air Lines PAC

Mailing Address 1212 New York Avenue, NW
Suite 200

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2013
Transaction ID : C19956082

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)
A. Seafarers Political Activity Donation

Mailing Address 5201 Auth Way

City State Zip Code
Camp Springs MD 20746

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2013
Transaction ID : C19774312

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Emergent Biosolutions Inc. Employees PAC

Mailing Address 2273 Research Boulevard
Suite 400

City State Zip Code
Rockville MD 20850

FEC ID number of contributing federal political committee. **C** C00380303

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2013
Transaction ID : C19772573

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. American Beverage Association PAC

Mailing Address 1101 16th Street, NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00100107

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2013
Transaction ID : C19766474

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 11000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial) A. Generic Pharmaceutical Association PAC		Date of Receipt
Mailing Address 777 6th Street, NW Suite 510		<input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00383463		Transaction ID : C19970624
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="1500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="1500.00"/>		

Full Name (Last, First, Middle Initial) B. Arnold & Porter LLP Partners PAC		Date of Receipt
Mailing Address 555 12th Street NW		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C C00216895		Transaction ID : C19961054
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		

Full Name (Last, First, Middle Initial) C. National Treasury Employees PAC		Date of Receipt
Mailing Address 1750 H Street, NW		<input type="text" value="05"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C C00107128		Transaction ID : C19963584
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="9000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial) A. NAIOP PAC		Date of Receipt
Mailing Address 2201 Cooperative Way 3rd Floor		<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City Herndon	State VA	Zip Code 20171
FEC ID number of contributing federal political committee.	<input type="text" value="C00233304"/>	Transaction ID : C19977274
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) B. National Pork Producers Council PAC		Date of Receipt
Mailing Address PO Box 10383		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City Des Moines	State IA	Zip Code 50306
FEC ID number of contributing federal political committee.	<input type="text" value="C00201871"/>	Transaction ID : C19772575
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. Greenberg Traurig, P.A. PAC		Date of Receipt
Mailing Address 54 State Street, 6th Floor		<input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City Albany	State NY	Zip Code 12207
FEC ID number of contributing federal political committee.	<input type="text" value="C00266585"/>	Transaction ID : C19977265
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
	<input type="text" value="2500.00"/>	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial) A. Poet PAC		Date of Receipt
Mailing Address 4615 North Lewis Avenue		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
Sioux Falls	SD	57104
FEC ID number of contributing federal political committee.	<input type="text" value="C00450692"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	
		Transaction ID : C19769365
		Amount of Each Receipt this Period <input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) B. CVS/Caremark Corporation Employees PAC		Date of Receipt
Mailing Address 1300 I Street, NW Suite 525 West		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee.	<input type="text" value="C00384818"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	
		Transaction ID : C19773685
		Amount of Each Receipt this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) C. Society of Thoracic Surgeons PAC		Date of Receipt
Mailing Address 20 F Street, NW Suite 310C		<input type="text" value="05"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee.	<input type="text" value="C00325936"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	
		Transaction ID : C19963585
		Amount of Each Receipt this Period <input type="text" value="2500.00"/>

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

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

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

FOR LINE NUMBER: PAGE 14 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)
A. American Academy Of Neurology (BrainPAC)

Mailing Address 509B Second Street, NE
Lower Level

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00435933

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2013
Transaction ID : C19961046

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
B. Fragomen Political Action Committee

Mailing Address 1101 15th Street, NW
Suite 700

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00418095

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2013
Transaction ID : C19961056

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
C. NYSE Euronext PAC (NYSE PAC)

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00402974

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : C19977266

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial) A. Universal Music Group Political Action Committee		Date of Receipt
Mailing Address 2220 Colorado Avenue		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Santa Monica	CA	90404
FEC ID number of contributing federal political committee.	<input type="text" value="C00392464"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1000.00"/>	
		Transaction ID : C19773686
		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) B. National Association of Health Underwriters PAC		Date of Receipt
Mailing Address 2000 14th Street Suite 450		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
Arlington	VA	22201
FEC ID number of contributing federal political committee.	<input type="text" value="C00283135"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="5000.00"/>	
		Transaction ID : C19985567
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) C. Society For Vascular Surgery PAC		Date of Receipt
Mailing Address 633 N. St. Clair Street 24th Floor		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
Chicago	IL	60611
FEC ID number of contributing federal political committee.	<input type="text" value="C00381459"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2000.00"/>	
		Transaction ID : C19961057
		Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="8000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial) A. National League of Postmasters of the US PAC		Date of Receipt
Mailing Address 5904 Richmond Highway Suite 500		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City Alexandria	State VA	Zip Code 22303
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00164152"/>	Transaction ID : C19956417
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1500.00"/>	<input type="text" value="1500.00"/>

Full Name (Last, First, Middle Initial) B. Bloomin' Brands, Inc. PAC		Date of Receipt
Mailing Address 2202 N. West Shore Blvd. 5th Floor		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Tampa	State FL	Zip Code 33607
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00253153"/>	Transaction ID : C19973128
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	<input type="text" value="10000.00"/>

Full Name (Last, First, Middle Initial) C. Building Owners & Managers Assoc. PAC		Date of Receipt
Mailing Address 1101 15th Street, NW Suite 800		<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00106435"/>	Transaction ID : C19970619
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 17 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)
A. American Assoc. of Nurse Anesthetists CRNA PAC

Mailing Address 222 S. Prospect Avenue

City Park Ridge State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00173153

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 Y Y
 05 / 29 / 2013
Transaction ID : C19972829

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	79500.00

**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)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)

A. Perkins Coie, LLP

Mailing Address 1201 Third Avenue, 40th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	29	/	2013

Transaction ID : **D558501**

Amount of Each Disbursement this Period

41.50

Full Name (Last, First, Middle Initial)

B. Perkins Coie, LLP

Mailing Address 1201 Third Avenue, 40th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	15	/	2013

Transaction ID : **D548461**

Amount of Each Disbursement this Period

330.50

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc.

Mailing Address 1101 15th Street, NW
Suite 500

City State Zip Code
Washington DC 20005

Purpose of Disbursement
Database Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	17	/	2013

Transaction ID : **D558832**

Amount of Each Disbursement this Period

375.00

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

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

747.00

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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)

<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)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)

A. First Data Merchant Services

Mailing Address 6200 S Quebec St

City Greenwood Village State CO Zip Code 80111-4729

Purpose of Disbursement
Merchant Service Fees

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	3

Transaction ID : D563293

Amount of Each Disbursement this Period

2	8	9	.	1	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. First Data Merchant Services

Mailing Address 6200 S Quebec St

City Greenwood Village State CO Zip Code 80111-4729

Purpose of Disbursement
Merchant Service Fees

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	3

Transaction ID : D563294

Amount of Each Disbursement this Period

0	.	1	0
---	---	---	---

Full Name (Last, First, Middle Initial)

C. Bienvenue Catering

Mailing Address PO Box 21610

City Washington State DC Zip Code 20009

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	3

Transaction ID : D558405

Amount of Each Disbursement this Period

1	4	1	5	.	0	0
---	---	---	---	---	---	---

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

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

1	7	0	4	.	2	5
---	---	---	---	---	---	---

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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)

<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)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)

A. Perkins Coie, LLP

Mailing Address 1201 Third Avenue, 40th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2013

Transaction ID : D551978

Amount of Each Disbursement this Period

361.40

Full Name (Last, First, Middle Initial)

B. Perkins Coie, LLP

Mailing Address 1201 Third Avenue, 40th Floor

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2013

Transaction ID : D552949

Amount of Each Disbursement this Period

321.95

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc.

Mailing Address 1101 15th Street, NW
Suite 500

City State Zip Code
Washington DC 20005

Purpose of Disbursement
Database Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 15 / 2013

Transaction ID : D551979

Amount of Each Disbursement this Period

375.00

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

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

1058.35

**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)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)

A. Card Member Services

Mailing Address PO Box 15710

City State Zip Code
Wilmington DE 19886-5710

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2013

Transaction ID : D552952

Amount of Each Disbursement this Period

761.86

Full Name (Last, First, Middle Initial)

B. Hotel George

Mailing Address 15 E Street, NW

City State Zip Code
Washington DC 20001-1501

Purpose of Disbursement
Catering & Room Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2013

Transaction ID : D552954

Amount of Each Disbursement this Period

761.86

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Business Card Services

Mailing Address PO Box 1570

City State Zip Code
Wilmington DE 19899-1570

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2013

Transaction ID : D555802

Amount of Each Disbursement this Period

783.84

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

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

1545.70

**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)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)

A. Hotel George

Mailing Address 15 E Street, NW

City Washington State DC Zip Code 20001-1501

Purpose of Disbursement
Catering & Room Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2013

Transaction ID : D555804

Amount of Each Disbursement this Period

783.84

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Card Member Services

Mailing Address PO Box 15710

City Wilmington State DE Zip Code 19886-5710

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2013

Transaction ID : D558486

Amount of Each Disbursement this Period

1415.00

Full Name (Last, First, Middle Initial)

C. Bienvenue Catering

Mailing Address PO Box 21610

City Washington State DC Zip Code 20009

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2013

Transaction ID : D558487

Amount of Each Disbursement this Period

1415.00

[MEMO ITEM]

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

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

1415.00

**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)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)

A. Card Member Services

Mailing Address PO Box 15710

City Wilmington State DE Zip Code 19886-5710

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2013

Transaction ID : D558503

Amount of Each Disbursement this Period

2772.20

Full Name (Last, First, Middle Initial)

B. Ruth's Chris Steakhouse

Mailing Address 1801 Connecticut, N.W.

City Washington State DC Zip Code 20009

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2013

Transaction ID : D558504

Amount of Each Disbursement this Period

2772.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Card Member Services

Mailing Address PO Box 15710

City Wilmington State DE Zip Code 19886-5710

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2013

Transaction ID : D558505

Amount of Each Disbursement this Period

1611.66

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

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

4383.86

**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)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)

A. Hotel George

Mailing Address 15 E Street, NW

City Washington State DC Zip Code 20001-1501

Purpose of Disbursement
Catering

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	9			2	0	1	3		

Transaction ID : D558506

Amount of Each Disbursement this Period

1	6	1	1	6	6
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Card Member Services

Mailing Address PO Box 15710

City Wilmington State DE Zip Code 19886-5710

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	3		

Transaction ID : D558827

Amount of Each Disbursement this Period

9	8	6	.	8	6
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Hotel George

Mailing Address 15 E Street, NW

City Washington State DC Zip Code 20001-1501

Purpose of Disbursement
Catering & Room Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	3		

Transaction ID : D558828

Amount of Each Disbursement this Period

9	8	6	.	8	6
---	---	---	---	---	---

[MEMO ITEM]

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

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

9	8	6	.	8	6
---	---	---	---	---	---

1	1	8	4	1	.	0	2
---	---	---	---	---	---	---	---

**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 checked="" 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

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)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)

A. AMERIPAC: The Fund for A Greater America

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Transfer of Joint Fundraising Proceeds

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2013

Transaction ID : D561771

Amount of Each Disbursement this Period

6865.38

Full Name (Last, First, Middle Initial)

B. Hoyer for Congress

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Transfer of Joint Fundraising Proceeds

Candidate Name

Steny Hoyer

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

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2013

Transaction ID : D561772

Amount of Each Disbursement this Period

5045.93

Full Name (Last, First, Middle Initial)

C. Hoyer for Congress

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Transfer of Joint Fundraising Proceeds

Candidate Name

Steny Hoyer

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

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2013

Transaction ID : D561773

Amount of Each Disbursement this Period

39591.97

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

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

51503.28

**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 checked="" 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)
Hoyer's Majority Fund

Full Name (Last, First, Middle Initial)

A. AMERIPAC: The Fund for A Greater America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2013

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Transfer of Joint Fundraising Proceeds

Candidate Name

Category/ Type

Transaction ID : D561769

Amount of Each Disbursement this Period

28646.97

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

--

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

--

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

28646.97

80150.25
