Image# 14941816855 PAGE 1 / 7

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or other man i	All Authorized	Committee			Office Use Only	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		mple: If typir r the lines.	ig, type	12FE4M5		
American Mid-Sized Banks (AMSB) Political Action Committee							
ADDRESS (number and street)	555 South Flower	Street			1 1 1 1 1		
ADDRESS (number and street) 12th Floor							
Check if different than previously reported. (ACC)	Los Angeles CA 90071						
2. FEC IDENTIFICATION NU	MBER ▼	CITY ▲		S	STATE 🛦	ZIP COI	DE 🛦
C C00501015		3. IS THIS REPORT	~	IEW N) OR	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Quarterly Report (YELL)) January 31 Year-End Report (YELL) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report	(c) 12-Day PRE-Ele Report f (d) 30-Day	Election on	Primary (12P Convention (** General (30G)	12C) /	Sep Oct 2 General (Special (in the State o	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
(TER)		Election on	M = M /	D D /	Y	in the State o	f
5. Covering Period 04	/ D D / Y	2014	through	06	30 /	2014	
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 Brent Tjarks							
Signature of Treasurer Brent Tjarks [Electronically Filed] Date O7 15 2014							
NOTE: Submission of false, errone	ous, or incomplete in	nformation may su	bject the pers	son signing thi	is Report to th	e penalties of 2 L	J.S.C. §437g.
Office Use Only						FEC FOR Rev. 12/20	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name American Mid-Sized Banks (AMSB) Political Action Committee 2014 06 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 55576.75 January 1, 2014 (b) Cash on Hand at 48076.75 Beginning of Reporting Period..... 5000.00 5000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 53076.75 60576.75 6(a) and 6(c) for Column B)..... 5000.00 12500.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 48076.75 48076.75 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

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

For further information contact:

0.00

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

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

10. Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D)

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Mid-Sized Banks (AMSB) Political Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<u> </u>	Total Trils Period	Calefidar fear-to-Date
. Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(i) iterilized (use Scriedule A)		
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add	0.00	0.00
Lines 11(a)(i) and (ii)	0.00	0.00
Lines II(a)(i) and (ii)	9.50	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
` '	5000.00	5000.00
(such as PACs)(d) Total Contributions (add Lines		1000.00
11(a)(iii), (b), and (c)) (Carry	5000.00	5000.00
Totals to Line 33, page 5)	3	
2. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
	0.00	0.00
B. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures	, , , , , , , , , , , , , , , , , , , ,	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
` '	0.00	0.00
, ,	7 7	7
(b) Lovin France (from Cohodula LIF)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(a) Total Transfers (add 10(-) 110(b))	0.00	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(b) Levin Funds (from Schedule H5)		0.00 0.00 0.00
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		5000.0
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	5000.00	5000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
. Operating Expenditures: (a) Allocated Federal/Non-Federal		Calcillati Teat-to-Date	
Activity (from Schedule H4)			
(i) Federal Share	0.00	0.00	
(ii) Non Foderal Chare	0.00	0.00	
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00	
Expenditures	0.00	0.00	
(c) Total Operating Expenditures			
(add 21(a)(i), (a)(ii), and (b)) ▶	0.00	0.00	
Transfers to Affiliated/Other Party	0.00	0.00	
Contributions to	0.00	0.00	
Federal Candidates/Committees and Other Political Committees	5000.00	7500.00	
Independent Expenditures	0.00	0.00	
(use Schedule E) Coordinated Party Expenditures	3 3	5.55	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
F			
Loan Repayments Made	0.00	0.00	
Loans Made	0.00	0.00	
Refunds of Contributions To: (a) Individuals/Persons Other			
Than Political Committees	0.00	0.00	
		0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(00011 00 17100)	7	7	
(d) Total Contribution Refunds			
(add Lines 28(a), (b), and (c))▶	0.00	0.00	
Other Birth and the	0.00	5000.00	
Other Disbursements	0.00	5000.00	
Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
(from Schedule H6)			
(i) Federal Share	0.00	0.00	
(**) #I - : # QI	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	
_			
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5000.00	12500.00	
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	5000.00	12500.00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	5000.00	5000.00
Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5000.00	5000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

S 17

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 7 (check only one) 11a 11b X 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and Si for commercial purposes, other than using the	tatements mand a	ay not be sold or used by any paddress of any political committed	erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Mid-Sized Banks (AM	SB) Polit	tical Action Committee	
Α.	Full Name (Last, First, Middle Initial) Astoria Financial Corporation-PAC	Date of Receipt		
	Mailing Address One Astoria Federal Plaza	05 29 2014		
	City Lake Success	State NY	Zip Code 11042	Transaction ID : SA11C.4324 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0234245	5000.00
	Name of Employer	Occupation	1	Committee Contribution
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5000.00	
— В.	Full Name (Last, First, Middle Initial)			Date of Receipt
٠.	Mailing Address	M = M / D = D / Y = Y = Y		
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
— С.	Full Name (Last, First, Middle Initial)			Date of Receipt
•	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	00.0	Year-to-Date ▼	
	SURTOTAL of Receipts This Page (optional)			5000.00

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

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

5000.00

ľ

for each category of the Detailed Summary Page 21b 22 28a 28b 28c 29 30	SCHEDULE B (FEC Form 3X)	Haranana L. L. ()	FOR LINE NUMBER: PAGE 7 OF 7			
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of for commercial purposes, other than using the name and address of any political committee. ANME OF COMMITTEE (in Full) ARME OF COMMITT	ITEMIZED DISBURSEMENTS		21b	22 🗙 23	_	
American Mid-Sized Banks (AMSB) Political Action Committee Full Name (Last, First, Middle Initial) A. Friends of Pat Toorney Mailing Address City State Pippose of Disbursement Candidate Name Office Sought: House President Candidate Name Office Sought: House President Candidate Name Office Sought: House President Disbursement Candidate Name Office Sought: Amount of Each Disbursement this Period Candidate Name Office Sought: House President Disbursement Candidate Name Office Sought: House President Disbursement Office Sought: Amount of Each Disbursement this Period Candidate Name Office Sought: House President Disbursement Office Sought: Amount of Each Disbursement this Period Candidate Name Office Sought: Amount of Each Disbursement this Period Category' Type Office Sought: Amount of Each Disbursement this Period Category' Type Office Sought: Amount of Each Disbursement this Period Category' Type Office Sought: President State Disbursement Category' Primary General President State Disbursement Amount of Each Disbursement this Period Category' Type Office Sought: State District: Date of Disbursement this Period Category' Type Office Sought: State District: Stat	Any information copied from such Reports and States or for commercial purposes, other than using the nar	Iments may not be sold or use ne and address of any political	d by any perso	on for the purpose of s	soliciting contributions	
A. Friends of Pat Toomey Mailing Address 228 S. Washington St., Suite 115 City State Zip Code VA 22314 Priprose of Disbursement Campaign contribution Candidate Name City State: Disbursement For: 2016 Senate Prinary General Prinary Ge		3) Political Action Cor	nmittee			
Mailing Address 228 S. Washington St., Suite 115						
City Alexandria VA 22314 Purpose of Disbursement Compagn contribution Candidate Name Candidate Name Category' Type Disbursement For: 2016 Senate President Primary General Category' Tother (specify) ▼ Date of Disbursement Campaign contribution Category' Type Date of Disbursement Date of Disbursement Transaction ID: SB23.4320 Amount of Each Disbursement this Period Category' Type Date of Disbursement Transaction ID: SB23.4320 Amount of Each Disbursement Transaction ID: SB23.4320 Amount of Each Disbursement Transaction ID: SB23.4320 Amount of Each Disbursement Transaction ID: SB23.4320 Transaction ID: SB23.4322 Transaction ID: SB23.4322 Amount of Each Disbursement this Period Category' Type Disbursement Tot: 2014 Purpose of Disbursement State: CT District: 04 Full Name (Last, First, Midde Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category' Type Disbursement Tot: 2014 Primary General Category' Type Date of Disbursement this Period Category' Type Date of Disb		M M / D D / Y Y Y Y				
Alexandria VA 22314 Pirrpose of Disbursement Campaign contribution Candidate Name Office Sought: House Senate President State: President State: Disbursement For: 2016 Full Name (Last, First, Middle Initial) Amount of Each Disbursement Other (specify) Transaction ID: SB23.4320 Amount of Each Disbursement this Period Category/ Type Date of Disbursement Other (specify) Transaction ID: SB23.4320 Amount of Each Disbursement Other (specify) Transaction ID: SB23.4320 Amount of Each Disbursement Other Specify Transaction ID: SB23.4320 Date of Disbursement Other Specify Transaction ID: SB23.4320 Date of Disbursement Other Specify Transaction ID: SB23.4320 Date of Disbursement Other Specify Transaction ID: SB23.4320 Transaction ID: SB23.432						
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Office Sought:			011	Amount of Each Dis	sbursement this Period	
Office Sought: House Senate President State: District: State: District: Other (specify) Full Name (Last, First, Middle Initial) House Sor Congress Mailing Address 857 Post Road, #312 City State Zip Code CT 08824 Purpose of Disbursement Candidate Name Office Sought: House Senate President State: Zip Code Full Name (Last, First, Middle Initial) City State Zip Code CT 08824 Purpose of Disbursement For: 2014 Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Disbursement For: 2014 Full Name (Last, First, Middle Initial) Category/ Type Office Sought: House Disbursement For: 2014 Full Name (Last, First, Middle Initial) Category/ Type Office Sought: House Disbursement For: Senate President Disbursement For: District: Od Purpose of Disbursement Category/ Type Office Sought: House Disbursement For: Disbursement For: Senate President Disbursement For: Disbursement Fo	Candidate Name				2500.00	
Full Name (Last, First, Middle Initial) Himes for Congress Mailing Address 857 Post Road, #312 City	Senate President	Primary General	1,500			
Mailing Address 857 Post Road, #312 City State Zip Code CT 06824 Purpose of Disbursement Campaign contribution Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ City State Zip Code Purpose of Disbursement this Period Category/ Type Disbursement For: 2014 Primary General Other (specify) ▼ Date of Disbursement Category/ Type Date of Disbursement Category/ Type Amount of Each Disbursement this Period Category/ Type Date of Disbursement Category/ Type Category/ Type Date of Disbursement Category/ Type Date of Disbursement this Period Category/ Type State: District: O4 Amount of Each Disbursement this Period Category/ Type State: District: O4 Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type State: District: O4 Amount of Each Disbursement this Period Category/ Type State: District: O4 Amount of Each Disbursement this Period Category/ Type State: District: O4 Amount of Each Disbursement this Period Category/ Type State: District: O4 Amount of Each Disbursement this Period Category/ Type State: District: O4 Amount of Each Disbursement this Period Category/ Type State: District: O4 Amount of Each Disbursement this Period Category/ Type Disbursement this Period Category/ Type						
Mailing Address 857 Post Road, #312 City State Zip Code CT 06824 Purpose of Disbursement Campaign contribution Candidate Name Office Sought:	B. Himes for Congress					
Fairfield CT 06824 Purpose of Disbursement Campaign contribution Candidate Name Category/ Type Category/ T	Mailing Address 857 Post Road, #312			1 1 1 1 1 1		
Campaign contribution Candidate Name Office Sought:	Fairfield			Transaction ID : \$	SB23.4322	
Office Sought: House Senate President State: CT District: 04 Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Office Sought: House Senate Primary General Other (specify) State: District: State: District: Substitute State: District: Sought: State Sign Code Senate Primary General Other (specify) Substitute State: District: Sought: State: District: Sought: State: District: Sought: State: District: Sought: State: Stat			011	Amount of Each Dis	sbursement this Period	
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Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Subtrotal of Disbursements This Page (optional)	Senate President	Primary General				
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)	• • • • • • • • • • • • • • • • • • • •	Date of Disburseme	ent			
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Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Purpose of Disbursement					
Senate Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)	Candidate Name		Category/ Type	Amount of Each Dis	sbursement this Period	
5000 00	Senate President	Primary General				
5000.00	SUBTOTAL of Dishursements This Page (ontional)				5000.00	
				1	5000.00	