



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

Write or Type Committee Name  
NEW PIONEERS PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		43128.57
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	43021.54									
(c) Total Receipts (from Line 19) .....	28250.00	77850.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	71271.54	120978.57								
7. Total Disbursements (from Line 31) .....	41347.79	91054.82								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	29923.75	29923.75								
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**

Write or Type Committee Name  
NEW PIONEERS PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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) .....	5750.00	13750.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	5750.00	13750.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	22500.00	64100.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	28250.00	77850.00
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)) .....	28250.00	77850.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	28250.00	77850.00

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.....	11347.79	30054.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11347.79	30054.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	30000.00	61000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	41347.79	91054.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41347.79	91054.82

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) .....	28250.00	77850.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28250.00	77850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11347.79	30054.82
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	11347.79	30054.82

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

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

FOR LINE NUMBER: PAGE 6 / 21  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
NEW PIONEERS PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael F. Chappell

Mailing Address 5400 Macomb St., NW

City State Zip Code  
Washington DC 20016

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

Name of Employer Occupation  
Fierce, Isakowitz & Blalock Government Relations

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 21 / 2011

**Transaction ID:** SA11AI.5076

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey M. MacKinnon

Mailing Address 3753 Oliver St., NW

City State Zip Code  
Washington DC 20015

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

Name of Employer Occupation  
Ryan, Phillips, Utrecht et al Partner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

**Transaction ID:** SA11AI.5081

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Diane MacPherson Major

Mailing Address 2232 Westwood Place

City State Zip Code  
Falls Church VA 22043

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

Name of Employer Occupation  
Bockorny Group Consulting

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

**Transaction ID:** SA11AI.5079

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

**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 7 / 21  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

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

Mailing Address 1776 K St., NW

City State Zip Code  
**Washington DC 20006**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 30 / 2011  
**Transaction ID: SA11AI.5086**  
 Amount of Each Receipt this Period 2000.00  
 Partnership-See memo

**B.** Full Name (Last, First, Middle Initial)  
Kevin Anderson

Mailing Address 1776 K St., NW

City State Zip Code  
**Washington DC 20006**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Wiley Rein LLP Partner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 30 / 2011  
**Transaction ID: SA11AI.5086.0**  
 Amount of Each Receipt this Period 2000.00  
 Partner Memo  
**[MEMO ITEM]**

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

Mailing Address 1776 K St., NW

City State Zip Code  
**Washington DC 20006**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 06 / 30 / 2011  
**Transaction ID: SA11AI.5088**  
 Amount of Each Receipt this Period 2000.00  
 No Partners Require Itemization

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">4000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">5750.00</span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 8 / 21</span>
	(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

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE	Date of Receipt
	Mailing Address 100 Abbott Park Rd. D312 AP6D-2	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 15 / 2011
	City State Zip Code Abbott Park IL 60064	<b>Transaction ID:</b> SA11C.5073
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/> C00040279	Amount of Each Receipt this Period <input type="text"/> 1500.00
	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"/> 1500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE	Date of Receipt
	Mailing Address 1111 North Fairfax St.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2011
	City State Zip Code Alexandria VA 22314	<b>Transaction ID:</b> SA11C.5082
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/> C00012880	Amount of Each Receipt this Period <input type="text"/> 5000.00
	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"/> 5000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)	Date of Receipt
	Mailing Address 600 14th Street, NW Suite 800	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 28 / 2011
	City State Zip Code Washington DC 20005	<b>Transaction ID:</b> SA11C.5077
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/> C00236489	Amount of Each Receipt this Period <input type="text"/> 1000.00
	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"/> 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 21  
(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

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
06 / 21 / 2011

Transaction ID: SA11C.5074

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
PACIFIC LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 700 NEWPORT CENTER DRIVE

City NEWPORT BEACH State CA Zip Code 92660

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

Transaction ID: SA11C.5084

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Mailing Address 317 Massachusetts Avenue, NE  
1st 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 ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2011

Transaction ID: SA11C.5078

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 8000.00

**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 / 21
	(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

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

**A.**

Full Name (Last, First, Middle Initial) PRICewaterhouseCOOPERS POLITICAL ACTION COMMITTEE I		Date of Receipt MM / DD / YYYY 06 / 21 / 2011
Mailing Address 1301 K Street, NW Suite 800W		<b>Transaction ID:</b> SA11C.5075
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b> C00107235		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**B.**

Full Name (Last, First, Middle Initial) REGENCE GROUP BLUEPAC, THE		Date of Receipt MM / DD / YYYY 06 / 30 / 2011
Mailing Address 330 9th St. SE Suite 300E		<b>Transaction ID:</b> SA11C.5083
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. <b>C</b> C00252684		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	22500.00

**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)

PAGE 11 / 21

<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)  
NEW PIONEERS PAC

A.	Full Name (Last, First, Middle Initial) Catalyst Group RW LLC	Transaction ID: SB21B.5152 Date of Disbursement
	Mailing Address 1115 Massachusetts Ave., NW Lower Level	<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Fundraising Consulting Candidate Name	<input type="text" value="10500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Huckaby Davis Lisker Inc.	Transaction ID: SB21B.5124 Date of Disbursement
	Mailing Address 228 S. Washington St., Ste. 115	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2011"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Compliance Services Candidate Name	<input type="text" value="847.79"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="11347.79"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="11347.79"/>

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

A.

Full Name (Last, First, Middle Initial)  
ALLEN WEST FOR CONGRESS

Transaction ID: SB23.5123

Date of Disbursement

Mailing Address PO Box 1028

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

City State Zip Code  
Deerfield Beach FL 33443

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

011
-----

Category/  
Type

Candidate Name  
ALLEN BERNARD WEST

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 22

B.

Full Name (Last, First, Middle Initial)  
ALLEN WEST FOR CONGRESS

Transaction ID: SB23.5134

Date of Disbursement

Mailing Address PO Box 1028

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

City State Zip Code  
Deerfield Beach FL 33443

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

011
-----

Category/  
Type

Candidate Name  
ALLEN BERNARD WEST

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 22

C.

Full Name (Last, First, Middle Initial)  
ANDY BARR FOR CONGRESS, INC.

Transaction ID: SB23.5145

Date of Disbursement

Mailing Address PO Box 2059

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

City State Zip Code  
Lexington KY 40588

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

011
-----

Category/  
Type

Candidate Name  
GARLAND "ANDY" BARR

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: KY District: 06

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

3000.00
---------

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

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
NEW PIONEERS PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>BASS VICTORY COMMITTEE</b>	<b>Transaction ID:</b> SB23.5112 Date of Disbursement 06 / 16 / 2011	
	Mailing Address PO Box 3451		
	City Concord State NH Zip Code 03302	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Contribution	011	Category/Type
	Candidate Name CHARLES F. BASS		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
	State: NH District: 02	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>BASS VICTORY COMMITTEE</b>	<b>Transaction ID:</b> SB23.5127 Date of Disbursement 06 / 21 / 2011	
	Mailing Address PO Box 3451		
	City Concord State NH Zip Code 03302	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Contribution	011	Category/Type
	Candidate Name CHARLES F. BASS		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
	State: NH District: 02	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>BOBBY SCHILLING FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.5141 Date of Disbursement 06 / 24 / 2011	
	Mailing Address 367 Avenue of The Cities Suite D		
	City East Moline State IL Zip Code 61244	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Contribution	011	Category/Type
	Candidate Name ROBERT T MR. SCHILLING		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
	State: IL District: 17	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<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)  
NEW PIONEERS PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) CANSECO FOR CONGRESS</p> <p>Mailing Address 10004 Wurzbach Road #366</p> <p>City San Antonio State TX Zip Code 78230</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name FRANCISCO 'QUICO' CANSECO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 23</p>	<p><b>Transaction ID:</b> SB23.5113 <b>Date of Disbursement</b> 06 / 16 / 2011</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1000.00</span></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) CANSECO FOR CONGRESS</p> <p>Mailing Address 10004 Wurzbach Road #366</p> <p>City San Antonio State TX Zip Code 78230</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name FRANCISCO 'QUICO' CANSECO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 23</p>	<p><b>Transaction ID:</b> SB23.5128 <b>Date of Disbursement</b> 06 / 21 / 2011</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1000.00</span></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) DUFFY FOR CONGRESS</p> <p>Mailing Address PO BOX 186</p> <p>City Ashland State WI Zip Code 54806</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name SEAN P DUFFY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WI District: 07</p>	<p><b>Transaction ID:</b> SB23.5114 <b>Date of Disbursement</b> 06 / 16 / 2011</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1000.00</span></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<span style="border: 1px solid black; padding: 5px; display: inline-block;">3000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 5px; display: inline-block;"> </span>

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

A.	Full Name (Last, First, Middle Initial) DUFFY FOR CONGRESS	Transaction ID: SB23.5135 Date of Disbursement
	Mailing Address PO BOX 186	<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City Ashland State WI Zip Code 54806	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name SEAN P DUFFY	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FITZPATRICK FOR CONGRESS	Transaction ID: SB23.5115 Date of Disbursement
	Mailing Address PO Box 185	<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>
	City Langhorne State PA Zip Code 19047	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name MICHAEL G FITZPATRICK	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FITZPATRICK FOR CONGRESS	Transaction ID: SB23.5129 Date of Disbursement
	Mailing Address PO Box 185	<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City Langhorne State PA Zip Code 19047	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name MICHAEL G FITZPATRICK	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF FRANK GUINTA	Transaction ID: SB23.5116 Date of Disbursement																			
	Mailing Address P.O. Box 877	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	6		2	0	1	1												
	City Manchester State NH Zip Code 03105	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name FRANK GUINTA	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) FRIENDS OF FRANK GUINTA	Transaction ID: SB23.5130 Date of Disbursement																			
	Mailing Address P.O. Box 877	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	1		2	0	1	1												
	City Manchester State NH Zip Code 03105	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name FRANK GUINTA	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) FRIENDS OF JOE HECK	Transaction ID: SB23.5117 Date of Disbursement																			
	Mailing Address PO Box 750114	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	6		2	0	1	1												
	City Las Vegas State NV Zip Code 89136	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name JOE HECK	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00
3000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
NEW PIONEERS PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF JOE HECK</p> <p>Mailing Address PO Box 750114</p> <p>City Las Vegas State NV Zip Code 89136</p> <p>Purpose of Disbursement Contribution Candidate Name JOE HECK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5131 <b>Date of Disbursement</b> 06 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) FRIENDS OF NAN HAYWORTH</p> <p>Mailing Address 51 Gleneida Avenue</p> <p>City Carmel State NY Zip Code 10512</p> <p>Purpose of Disbursement Contribution Candidate Name NAN HAYWORTH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5142 <b>Date of Disbursement</b> 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) KAREN DIEBEL FOR CONGRESS 2012</p> <p>Mailing Address 127 WEST FAIRBANKS AVE #482</p> <p>City WINTER PARK State FL Zip Code 32789</p> <p>Purpose of Disbursement Contribution Candidate Name KAREN DIEBEL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5146 <b>Date of Disbursement</b> 06 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) LATHAM FOR CONGRESS <hr/> Mailing Address PO BOX 8237 <hr/> City DES MOINES State IA Zip Code 50301 <hr/> Purpose of Disbursement Contribution Candidate Name THOMAS LATHAM Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5118 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) LATHAM FOR CONGRESS <hr/> Mailing Address PO BOX 8237 <hr/> City DES MOINES State IA Zip Code 50301 <hr/> Purpose of Disbursement Contribution Candidate Name THOMAS LATHAM Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5132 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) LOU BARLETTA FOR CONGRESS <hr/> Mailing Address P.O. BOX 128 <hr/> City Hazleton State PA Zip Code 18201 <hr/> Purpose of Disbursement Contribution Candidate Name LOU BARLETTA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5111 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

**A.** Full Name (Last, First, Middle Initial)  
LOU BARLETTA FOR CONGRESS

Mailing Address P.O. BOX 128

City Hazleton State PA Zip Code 18201

Purpose of Disbursement  
Contribution

Candidate Name  
LOU BARLETTA

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 11

Transaction ID: SB23.5126

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL GRIMM FOR CONGRESS

Mailing Address 560 9th Street

City Brooklyn State NY Zip Code 11215

Purpose of Disbursement  
Contribution

Candidate Name  
MICHAEL GRIMM

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

Transaction ID: SB23.5143

Date of Disbursement

06 / 24 / 2011

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
OLSON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 16381

City SUGAR LAND State TX Zip Code 77496

Purpose of Disbursement  
Contribution

Candidate Name  
PETER G OLSON

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: TX District: 22

Transaction ID: SB23.5136

Date of Disbursement

06 / 24 / 2011

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) PANTANO FOR NORTH CAROLINA COMMITTEE Mailing Address 5700 OLEANDER DRIVE City WILMINGTON State NC Zip Code 28403 Purpose of Disbursement Contribution Candidate Name ILARIO GREGORY PANTANO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5144 Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2011
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

<b>B.</b> Full Name (Last, First, Middle Initial) PAT MEEHAN FOR CONGRESS Mailing Address 5035 TOWNSHIP LINE ROAD PO BOX 308 City DREXEL HILL State PA Zip Code 19026 Purpose of Disbursement Contribution Candidate Name PATRICK L MEEHAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5122 Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2011
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

<b>C.</b> Full Name (Last, First, Middle Initial) PAT MEEHAN FOR CONGRESS Mailing Address 5035 TOWNSHIP LINE ROAD PO BOX 308 City DREXEL HILL State PA Zip Code 19026 Purpose of Disbursement Contribution Candidate Name PATRICK L MEEHAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5133 Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2011
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NEW PIONEERS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) RANDY ALTSCHULER FOR CONGRESS Mailing Address Post Office Box 657 City Stony Brook State NY Zip Code 11790 Purpose of Disbursement Contribution Candidate Name RANDOLPH MR. ALTSCHULER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5151 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

<b>B.</b> Full Name (Last, First, Middle Initial) ROBERT HURT FOR CONGRESS Mailing Address PO BOX 2 City CHATHAM State VA Zip Code 24531 Purpose of Disbursement Contribution Candidate Name ROBERT HURT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5140 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

<b>C.</b> Full Name (Last, First, Middle Initial) WALORSKI FOR CONGRESS INC Mailing Address PO Box 954 City Mishawaka State IN Zip Code 46546 Purpose of Disbursement Contribution Candidate Name JACKIE WALORSKI (SWIHART) Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5150 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	3000.00