

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2008 JUL 21 AM 11:22
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

SURGE TO SIXTY

ADDRESS (number and street)

P.O. BOX 7072

Check if different than previously reported. (ACC)

HICKSVILLE NY 11802-7072

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00410282

3. IS THIS REPORT

NEW

(N)

OR

AMENDED

(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c)

- 12-Day PRE-Election Report for the:
 - Primary (12P)
 - Convention (12C)
 - General (12G)
 - Special (12S)
 - Runoff (12R)

Election on

MM / DD / YYYY

in the State of

(d)

- 30-Day POST-Election Report for the:
 - General (30G)
 - Runoff (30R)
 - Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

04 / 01 / 2008 through 06 / 30 / 2008

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

Type or Print Name of Treasurer

Jessica C. Sutliff

Signature of Treasurer

Jess C. Sutliff

Date

07 / 14 / 2008

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

28039792876

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SURGE TO SIXTY

Report Covering the Period: From: MM ' DD ' YYYY 04 ' 01 ' 2008 To: MM ' DD ' YYYY 06 ' 30 ' 2008

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	2008	899
(b) Cash on Hand at Beginning of Reporting Period.....	899	
(c) Total Receipts (from Line 19)	10000	20790
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10899	21689
7. Total Disbursements (from Line 31)	7500	18290
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3399	3399
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	175729	

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

28039792877

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

SURGE TO SIXTY

Report Covering the Period: From:

MM ' DD ' YYYY
04 ' 01 ' 2008

To:

MM ' DD ' YYYY
06 ' 30 ' 2008

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).....

10000

17500

(ii) Unitemized.....

0

3290

(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶

10000

20790

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶

10000

20790

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶

10000

20790

20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶

10000

20790

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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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	7500	18290
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7500	18290
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7500	18290
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7500	18290

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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)	10000	20790
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000	20790
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7500	18290
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7500	18290

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

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

FOR LINE NUMBER: PAGE 1 OF 2

(check only one)

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

SURGE TO SIXTY

Full Name (Last, First, Middle Initial)

A. **SUTLIFF, JESSICA C.**

Mailing Address

P.O. BOX 7072

City

HICKSVILLE

State

NY

Zip Code

11802-7072

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

485.17

Date of Receipt

01 / **20** / **2008**

Amount of Each Receipt this Period

51.91

Memo: Telephone Service
(amount included on
Schedule D)
Credit Card Advance

Full Name (Last, First, Middle Initial)

B. **SUTLIFF, JESSICA C.**

Mailing Address

P.O. BOX 7072

City

HICKSVILLE

State

NY

Zip Code

11802-7072

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

485.17

Date of Receipt

02 / **20** / **2008**

Amount of Each Receipt this Period

51.92

Memo: Telephone Service
(amount included on
Schedule D)
Credit Card Advance

Full Name (Last, First, Middle Initial)

C. **SUTLIFF, JESSICA C.**

Mailing Address

P.O. BOX 7072

City

HICKSVILLE

State

NY

Zip Code

11802-7072

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

485.17

Date of Receipt

03 / **20** / **2008**

Amount of Each Receipt this Period

51.92

Memo: Telephone Service
(amount included on
schedule D)
Credit Card Advance

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

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

Empty receipt boxes for subtotal and total.

28039792881

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)

Grid for line numbers 11a-17 with checkboxes. 11a is checked.

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NAME OF COMMITTEE (In Full)

SURGE TO SIXTY.

Full Name (Last, First, Middle Initial)

A. SUTLIFF, JESSICA C.

Mailing Address

P.O. Box 7072

City HICKSVILLE

State NY

Zip Code 11802-7072

Date of Receipt

05 / 30 / 2008

Amount of Each Receipt this Period

10000

FEC ID number of contributing federal political committee.

C

Name of Employer

Kasowitz Benson Torres Friedman

Occupation

Attorney

Receipt For:

Primary (checked), General, Other (specify)

Aggregate Year-to-Date

48517

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary, General, Other (specify)

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary, General, Other (specify)

Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional)

10000

TOTAL This Period (last page this line number only)

10000

28039792882

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
SURGE TO SIXTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SUTLIFF, JESSICA C		Nature of Debt (Purpose): Telephone Service (Memo Entries on Schedule A)
Mailing Address P.O. BOX 7072		
City State Zip Code HICKSVILLE NY 11802-7072		

Outstanding Balance Beginning This Period 160154	Amount Incurred This Period 15575	Payment This Period 0	Outstanding Balance at Close of This Period 175729
--	---	---------------------------------	--

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
---	-----------------------------	---------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
---	-----------------------------	---------------------	---

1) SUBTOTALS This Period This Page (optional).....▶	
2) TOTALS This Period (last page this line number only).....▶	175729
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	0
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	175729

28039792883

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jms
 PREPARER
 (3/2005)

7/21/08
 DATE PREPARED

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