

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Solidarity PAC

ADDRESS (number and street) 607 14th Street, NW, Suite 800

Check if different than previously reported. (ACC)

Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00360388

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

(c) 12-Day **PRE-Election** Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input checked="" type="checkbox"/> Special (12G)	

Election on 11 03 2009 in the State of NY

(d) 30-Day **Post -Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
----------------------------------------	---------------------------------------	----------------------------------------

Election on in the State of

5. Covering Period 07 01 2009 through 10 14 2009

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 Don Solem

Signature of Treasurer Electronically Filed by Don Solem Date 10 22 2009

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							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Solidarity PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		80942.75
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	129695.05									
(c) Total Receipts (from Line 19)	6530.82	165355.82								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	136225.87	246298.57								
7. Total Disbursements (from Line 31)	69557.26	179629.96								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	66668.61	66668.61								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Solidarity PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	0	9

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)	3000.00	109500.00
(ii) Unitemized	100.00	825.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3100.00	110325.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	51600.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3100.00	161925.00
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)	3430.82	3430.82
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))	6530.82	165355.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6530.82	165355.82

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	39057.26	73129.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	39057.26	73129.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30500.00	106500.00
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))..	69557.26	179629.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	69557.26	179629.96

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 17

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)	3100.00	161925.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3100.00	161925.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	39057.26	73129.96
37. Offsets to Operating Expenditures (from Line 15, page 3)	3430.82	3430.82
38. Net Operating Expenditures (subtract Line 37 from Line 36)	35626.44	69699.14

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

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Solidarity PAC

A. Full Name (Last, First, Middle Initial)
Douglas H. Button

Mailing Address 2 GreenHills Court

City Millbrae State CA Zip Code 94030

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

Name of Employer South San Francisco Scavenger Comp Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2009
Transaction ID: C1114
 Amount of Each Receipt this Period 1000.00

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

Mailing Address 2511 Broadway Street

City San Francisco State CA Zip Code 94115

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

Name of Employer The Capital Group Occupation Investment Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 16 / 2009
Transaction ID: C1111
 Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Gregory W. Wendt

Mailing Address 1 Market Street Suite 1800

City San Francisco State CA Zip Code 94105

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

Name of Employer The Capital Group Occupation Portfolio Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 16 / 2009
Transaction ID: C1110
 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 3000.00

TOTAL This Period (last page this line number only) ► 3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Solidarity PAC

A.

Full Name (Last, First, Middle Initial) Solem and Associates		Date of Receipt																				
Mailing Address 550 Kearny Street Suite 1010		<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>8</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	6		2	0	0	9													
City	State	Zip Code																				
San Francisco	CA	94108																				
FEC ID number of contributing federal political committee.		Transaction ID: C1113																				
C		Amount of Each Receipt this Period																				
		3430.82																				
Name of Employer	Occupation	Refund																				
Receipt For:	Aggregate Year-to-Date ▼																					
<input type="checkbox"/> Primary <input type="checkbox"/> General																						
<input type="checkbox"/> Other (specify) ▼	3430.82																					

SUBTOTAL of Receipts This Page (optional)	▶	3430.82
TOTAL This Period (last page this line number only)	▶	3430.82

**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)
Solidarity PAC

A.	Full Name (Last, First, Middle Initial) Kieloch Consulting, Inc.	Transaction ID: D869 Date of Disbursement 07 / 28 / 2009
	Mailing Address 501 Capitol Court, NE Suite 100 City Washington State DC Zip Code 20002 Purpose of Disbursement Fundraising Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 2250.00

B.	Full Name (Last, First, Middle Initial) Kieloch Consulting, Inc.	Transaction ID: D872 Date of Disbursement 08 / 27 / 2009
	Mailing Address 501 Capitol Court, NE Suite 100 City Washington State DC Zip Code 20002 Purpose of Disbursement Fundraising Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 2250.00

C.	Full Name (Last, First, Middle Initial) Kieloch Consulting, Inc.	Transaction ID: D890 Date of Disbursement 09 / 29 / 2009
	Mailing Address 501 Capitol Court, NE Suite 100 City Washington State DC Zip Code 20002 Purpose of Disbursement Fundraising Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 2250.00

SUBTOTAL of Disbursements This Page (optional)	6750.00
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 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)
Solidarity PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Perkins Coie LLP</p> <p>Mailing Address 607 14th Street, NW Suite 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Legal & Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D868</p> <p>Date of Disbursement 07 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 819.50</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Perkins Coie LLP</p> <p>Mailing Address 607 14th Street, NW Suite 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Legal & Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D871</p> <p>Date of Disbursement 09 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 1735.56</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Solem and Associates</p> <p>Mailing Address 550 Kearny Street Suite 1010</p> <p>City San Francisco State CA Zip Code 94108</p> <p>Purpose of Disbursement Fundraising/Consulting/Catering/Event Exp</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D870</p> <p>Date of Disbursement 08 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 28352.64</p>

SUBTOTAL of Disbursements This Page (optional) ▶

30907.70

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 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)
Solidarity PAC

A.	Full Name (Last, First, Middle Initial) Solem and Associates	Transaction ID: D887 Date of Disbursement
	Mailing Address 550 Kearny Street Suite 1010	<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City San Francisco State CA Zip Code 94108	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising Consulting Services	<input type="text" value="51.01"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bank Of America	Transaction ID: D865 Date of Disbursement
	Mailing Address PO Box 17309	<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Baltimore State MD Zip Code 21297	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment, See Below	<input type="text" value="1312.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: D866 Date of Disbursement
	Mailing Address PO Box 66100	<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Chicago State IL Zip Code 60666	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel	<input type="text" value="643.60"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1363.21"/>
TOTAL 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 11 / 17

<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)
Solidarity PAC

A.	Full Name (Last, First, Middle Initial) US Airway			Transaction ID: D867	
	Mailing Address 4000 E. Sky Harbor Boulevard			Date of Disbursement 07 / 21 / 2009	
	City Phoenix	State AZ	Zip Code 85034	Amount of Each Disbursement this Period 668.60	
	Purpose of Disbursement Travel		Category/ Type	[MEMO ITEM]	
	Candidate Name				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State:	District:			

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	39020.91

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

Use separate schedule(s)
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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)
Solidarity PAC

A. Full Name (Last, First, Middle Initial) Bill Owens for Congress <hr/> Mailing Address PO Box 1575 <hr/> City Plattsburgh State NY Zip Code 12901 <hr/> Purpose of Disbursement Contribution Candidate Name William Owens Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2009 Special Primar	Transaction ID: D873 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 2009 Special Primary 2000.00

B. Full Name (Last, First, Middle Initial) Bill Owens for Congress <hr/> Mailing Address PO Box 1575 <hr/> City Plattsburgh State NY Zip Code 12901 <hr/> Purpose of Disbursement Contribution Candidate Name William Owens Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2009 Special Genera	Transaction ID: D889 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 2009 Special General 2500.00

C. Full Name (Last, First, Middle Initial) Bocchieri For Congress <hr/> Mailing Address PO Box 3016 <hr/> City Alliance State OH Zip Code 44601 <hr/> Purpose of Disbursement Contribution Candidate Name John A Bocchieri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D878 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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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)
Solidarity PAC

A.	Full Name (Last, First, Middle Initial) Capuano for Senate	Transaction ID: D884 Date of Disbursement 09 / 24 / 2009
	Mailing Address 172 Central Street	Amount of Each Disbursement this Period 1000.00
	City Somerville State MA Zip Code 02145	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name Michael E. Capuano	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2009 Special Primar

B.	Full Name (Last, First, Middle Initial) Committee to Elect Alan Grayson	Transaction ID: D883 Date of Disbursement 09 / 24 / 2009
	Mailing Address PO Box 536447	Amount of Each Disbursement this Period 1000.00
	City Orlando State FL Zip Code 32853	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name Alan Grayson	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Courtney for Congress	Transaction ID: D860 Date of Disbursement 07 / 02 / 2009
	Mailing Address 38 Risley Road	Amount of Each Disbursement this Period 1000.00
	City Vernon State CT Zip Code 06066	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name Joe Courtney	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02	Disbursement For: 2010 <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)
Solidarity PAC

A.	Full Name (Last, First, Middle Initial) Friends Of Dan Maffei	Transaction ID: D886 Date of Disbursement
	Mailing Address PO Box 74	<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Syracuse State NY Zip Code 13214	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Daniel B Maffei	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Glenn Nye	Transaction ID: D880 Date of Disbursement
	Mailing Address PO Box 68444	<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Virginia Beach State VA Zip Code 23471	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Glenn C. Nye	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Garamendi for Congress	Transaction ID: D885 Date of Disbursement
	Mailing Address 3605 Long Beach Boulevard Suite 426	<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Long Beach State CA Zip Code 90807	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name John Garamendi	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ O2009 Special Runoff

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL 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)

<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)
Solidarity PAC

A.

Full Name (Last, First, Middle Initial)
Hoosiers for Hill

Transaction ID: D882
Date of Disbursement

Mailing Address PO Box 1071

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

City Seymour State IN Zip Code 47274

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

2500.00

Candidate Name
Baron P Hill

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IN District: 09

B.

Full Name (Last, First, Middle Initial)
Kathy Dahlkemper for Congress

Transaction ID: D879
Date of Disbursement

Mailing Address 530 Seminole Drive

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

City Erie State PA Zip Code 16505

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

1500.00

Candidate Name
Kathleen Ann Dahlkemper

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 03

C.

Full Name (Last, First, Middle Initial)
Kendrick Meek for Florida

Transaction ID: D888
Date of Disbursement

Mailing Address 111 NW 183rd Street
Suite 325

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

City Miami State FL Zip Code 33169

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

2500.00

Candidate Name
Kendrick B. Meek

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District:

SUBTOTAL of Disbursements This Page (optional)

6500.00

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)
Solidarity PAC

A.	Full Name (Last, First, Middle Initial) Kirkpatrick for Arizona	Transaction ID: D875 Date of Disbursement 09 / 24 / 2009
	Mailing Address PO Box 993	Amount of Each Disbursement this Period 2500.00
	City Prescott State AZ Zip Code 86302	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Ann Kirkpatrick	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Martin Heinrich For Congress	Transaction ID: D874 Date of Disbursement 09 / 24 / 2009
	Mailing Address 2118 Central Avenue SE #71	Amount of Each Disbursement this Period 2500.00
	City Albuquerque State NM Zip Code 87106	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Martin Heinrich	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Perriello for Congress	Transaction ID: D876 Date of Disbursement 09 / 24 / 2009
	Mailing Address PO Box 306	Amount of Each Disbursement this Period 2500.00
	City Ivy State VA Zip Code 22945	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Thomas S.P. Perriello	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7500.00
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 17 / 17

<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)
Solidarity PAC

A. Full Name (Last, First, Middle Initial) Schauer For Congress <hr/> Mailing Address P.O. Box 100 <hr/> City State Zip Code Battle Creek MI 49016 <hr/> Purpose of Disbursement Contribution Candidate Name Mark H. Schauer <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D881 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Titus for Congress <hr/> Mailing Address 1637 Travois Circle <hr/> City State Zip Code Las Vegas NV 89119 <hr/> Purpose of Disbursement Contribution Candidate Name Dina Titus <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D877 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

3500.00

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

30500.00