

**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

Team America PAC

ADDRESS (number and street)

501 Church Street #315

☐Check if different  
than previously  
reported. (ACC)

Vienna

VA

22180

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00396291

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:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

08

01

2009

through

08

31

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

Helen Fullinwider

Signature of Treasurer

Electronically Filed by Helen Fullinwider

Date

11

12

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**FEC FORM 3X**

(Rev. 12/2004)

A. Form/Schedule : **F3XA**  
Transaction ID :

Mr. Buckley, Regarding your letter of October 9: This report has been amended to correct YTD totals, which needed to be updated after amendments to previous reports.

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
Team America PAC

Report Covering the Period:

From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	8

D	D
3	1

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	2009	18402.30
(b) Cash on Hand at Beginning of Reporting Period .....	50809.29	
(c) Total Receipts (from Line 19) .....	27616.75	256063.02
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	78426.04	274465.32
7. Total Disbursements (from Line 31) .....	26034.01	222073.29
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	52392.03	52392.03
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) .....	4000.00	

☒ 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)

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Write or Type Committee Name

Team America PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	8	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	W	Y
0	8	3	1	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) .....	7790.00	57257.00
(ii) Unitemized .....	19780.18	190644.09
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	27570.18	247901.09
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	27570.18	247901.09
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	2280.07
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	46.57	5881.86
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)) .....	27616.75	256063.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	27616.75	256063.02

## DETAILED SUMMARY PAGE

of Disbursements

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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.....	26034.01	217166.29	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	26034.01	217166.29	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	4907.00	
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))..	26034.01	222073.29	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26034.01	222073.29	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	27570.18	247901.09
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	27570.18	247901.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	26034.01	217166.29
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	2280.07
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	26034.01	214886.22

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

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

FOR LINE NUMBER: PAGE 7 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Linda Anderson

Mailing Address 3781 Marshall Rd.

City

Grantsville

State

UT

Zip Code

84029-9513

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Zions First National Bank

Occupation  
banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C57983

Amount of Each Receipt this Period

30.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Brenda Arthur

Mailing Address P.O. Box 18353

City

Anaheim

State

CA

Zip Code

92817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
insurance broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 8 / 2 0 0 9

Transaction ID: 90912.C58609

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Brenda Arthur

Mailing Address P.O. Box 18353

City

Anaheim

State

CA

Zip Code

92817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
insurance broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 9

Transaction ID: 90912.C58630

Amount of Each Receipt this Period

200.00

Receipt

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

480.00

**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 8 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Mary Baird

Mailing Address 22236 Woodlawn Ave.

City

Brooksville

State

FL

Zip Code

34601-2701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: 90912.C58479

Amount of Each Receipt this Period

75.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Daniel Baker

Mailing Address 14326 River Forest Dr.

City

Houston

State

TX

Zip Code

77079-7417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shell Global Solutions

Occupation  
engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C58014

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Basinski

Mailing Address 439 Avenida Sevilla Unit C

City

Laguna Woods

State

CA

Zip Code

92637-3858

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 7 / 2 0 0 9

Transaction ID: 90810.C57406

Amount of Each Receipt this Period

25.00

Receipt

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

125.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

A.

Full Name (Last, First, Middle Initial)

Ervin Bickley

Mailing Address 2749 Wulfert Rd.

City

Sanibel

State

FL

Zip Code

33957-2216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C58064

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Dolores Boehning

Mailing Address P.O. Box 1115

City

Eagar

State

AZ

Zip Code

85925-1115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 6 / 2 0 0 9

Transaction ID: 90829.C58370

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Brouillard

Mailing Address 374 Stilson Canyon Rd.

City

Chico

State

CA

Zip Code

95928-9117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 0 9

Transaction ID: 90829.C57791

Amount of Each Receipt this Period

50.00

Receipt

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

250.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Harold Browne

Mailing Address 3405 W 32nd Ave. #701

City

Denver

State

CO

Zip Code

80211-3117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C58037

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Susan Brunoff

Mailing Address 334 W Cedar St.

City

New Holland

State

PA

Zip Code

17557-1202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: 90829.C57844

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Billie Campbell

Mailing Address 900 Seminole Rd.

City

Radcliff

State

KY

Zip Code

40160-2241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C58056

Amount of Each Receipt this Period

50.00

Receipt

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

500.00

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

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

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FOR LINE NUMBER: PAGE 11 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Barbara Carlson

Mailing Address 11072 Lone Pine

City

Littleton

State

CO

Zip Code

80125-9291

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 6 / 2 0 0 9

Transaction ID: 90829.C58383

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Elsie Case

Mailing Address P.O. Box 274

City

Magdalena

State

NM

Zip Code

87825-0274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

unemployed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 4 / 2 0 0 9

Transaction ID: 90829.C58291

Amount of Each Receipt this Period

35.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Molly Cole

Mailing Address 5516 Boulder Hwy. Ste. 2F # 248

City

Las Vegas

State

NV

Zip Code

89122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 1 / 2 0 0 9

Transaction ID: 90829.C58198

Amount of Each Receipt this Period

50.00

Receipt

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

135.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Clifford Cone

Mailing Address P.O. Box 1629

City

Lovington

State

NM

Zip Code

88260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation

PHARMACEUTICALS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 0 9

Transaction ID: 90829.C57790

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Marjorie Davis

Mailing Address 6 Huckleberry Ln.

City

Augusta

State

ME

Zip Code

04330-6022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

n/a

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 6 / 2 0 0 9

Transaction ID: 90829.C58385

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

George Earnest

Mailing Address 110 Country Club Dr. SW Apt. 201

City

Lakewood

State

WA

Zip Code

98498-5311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C57979

Amount of Each Receipt this Period

35.00

Receipt

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

385.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Howard Farmer

Mailing Address 946 Holbrook Circle

City

Ft. Walton Beach

State

FL

Zip Code

32547

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 1 / 2 0 0 9

Transaction ID: 90829.C57760

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Eugene Gaddie

Mailing Address 1125 S De Wolf Ave.

City

Fresno

State

CA

Zip Code

93727-9403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired US Airforce

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: 90829.C57817

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Richard Griffith

Mailing Address P.O. Box 91610

City

Lafayette

State

LA

Zip Code

70509-1610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 0 9

Transaction ID: 90810.C57363

Amount of Each Receipt this Period

200.00

Receipt

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

325.00

**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 14 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

James Hiltz

Mailing Address 1554 Paisley St. NW

City

Palm Bay

State

FL

Zip Code

32907-8029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.74

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 6 / 2 0 0 9

Transaction ID: 90810.C57380

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Gary Johnson

Mailing Address 9886 South Burberry Way

City

Highlands Ranch

State

CO

Zip Code

80129-6908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 1 / 2 0 0 9

Transaction ID: 90829.C58218

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Mary Kasbohm

Mailing Address 149 Fleetwood Terr.

City

Williamsville

State

NY

Zip Code

14221-4469

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 9

Transaction ID: 90829.C57912

Amount of Each Receipt this Period

100.00

Receipt

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

225.00

**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 15 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

John Keaveny

Mailing Address 309 Lunar Ln.

City

Bismarck

State

ND

Zip Code

58503-0469

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation

Oral & Haxillofacial Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 9

Transaction ID: 90829.C57900

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Gayle Kesselman

Mailing Address 519 Hackensack St.

City

Carlstadt

State

NJ

Zip Code

07072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UMDNJ

Occupation

physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: 90829.C57840

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Walter Kleiner

Mailing Address 1725 89th Place NE

City

Clyde Hill

State

WA

Zip Code

98004-3213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 9 / 2 0 0 9

Transaction ID: 90829.C58127

Amount of Each Receipt this Period

300.00

Receipt

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

1450.00

**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 16 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Alonah Lorenz

Mailing Address 160 40th Ave. SE

City

Benson

State

MN

Zip Code

56215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DNA

Occupation  
homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 9

Transaction ID: 90912.C58463

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Terry Ohlemeier

Mailing Address 3742 N Harrison Rd.

City

Tucson

State

AZ

Zip Code

85749-8742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DOD

Occupation  
YA-02

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 6 / 2 0 0 9

Transaction ID: 90829.C58369

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Michael Olsen

Mailing Address 10971 NW Glenwood Rd.

City

Union Star

State

MO

Zip Code

64494-9175

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bunge Milling, Inc.

Occupation  
Extruder Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: 90829.C57837

Amount of Each Receipt this Period

60.00

Receipt

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

210.00

**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 17 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Rushton Patterson

Mailing Address 44 S Front St. Apt. 3B

City

Memphis

State

TN

Zip Code

38103-2424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation

medical doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 9

Transaction ID: 90829.C57901

Amount of Each Receipt this Period

500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Karlis Pliuksis

Mailing Address 10812 3rd St.

City

Mokena

State

IL

Zip Code

60448

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C58041

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Price

Mailing Address 765 10th St.

City

Boulder

State

CO

Zip Code

80302-7508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: 90829.C57866

Amount of Each Receipt this Period

250.00

Receipt

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

850.00

**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 18 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Dorothy Rager

Mailing Address P.O. Box 121

City

Windber

State

PA

Zip Code

15963-0121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: 90829.C57812

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Samuel Rice

Mailing Address 515 S 2nd St.

City

King City

State

CA

Zip Code

93930-3001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 9

Transaction ID: 90829.C58146

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Bonita Richards

Mailing Address 3413 Wayland Dr.

City

Fort Worth

State

TX

Zip Code

76133-3128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Western Production Company

Occupation  
HR Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 0 / 2 0 0 9

Transaction ID: 90829.C57723

Amount of Each Receipt this Period

100.00

Receipt

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

300.00

**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 19 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Monte Richardson

Mailing Address 36 Lambeth Dr.

City

Asheville

State

NC

Zip Code

28803-3431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 9

Transaction ID: 90912.C58464

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Roth

Mailing Address P.O. Box 369

City

Homosassa Springs

State

FL

Zip Code

34447-0369

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 7 / 2 0 0 9

Transaction ID: 90829.C58412

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Steve Rothacker

Mailing Address 689 Kentwood Dr.

City

Rockwall

State

TX

Zip Code

75032-7505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 9

Transaction ID: 90829.C58147

Amount of Each Receipt this Period

100.00

Receipt

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

400.00

**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  
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FOR LINE NUMBER: PAGE 20 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Schafer

Mailing Address 610 1st St.

City

Coronado

State

CA

Zip Code

92118-1202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: 90912.C58497

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Walter Shek

Mailing Address 12630 S Laflin St.

City

Calumet Park

State

IL

Zip Code

60827-6012

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C58042

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Boris Slutsky

Mailing Address 5514 Noah Way

City

San Diego

State

CA

Zip Code

92117-1334

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Univ. of California, San  
Diego

Occupation  
engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 4 / 2 0 0 9

Transaction ID: 90829.C58323

Amount of Each Receipt this Period

200.00

Receipt

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

600.00

**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 21 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Gregory Small

Mailing Address P.O. Box 5

City

Fort Bidwell

State

CA

Zip Code

96112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 9

Transaction ID: 90829.C58148

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Grace Stetzer

Mailing Address 8629 La Losa Dr. W

City

Jacksonville

State

FL

Zip Code

32217-4642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 3 / 2 0 0 9

Transaction ID: 90810.C57313

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Arthur Stone

Mailing Address 314 Hillside Ln.

City

Haddonfield

State

NJ

Zip Code

08033-1032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
L-3 Communications

Occupation  
engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C57986

Amount of Each Receipt this Period

400.00

Receipt

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

650.00

**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 22 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Karl Stone

Mailing Address 123 Sewall Ave. Apt. 2B

City

Brookline

State

MA

Zip Code

02446-5339

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 0 9

Transaction ID: 90829.C57789

Amount of Each Receipt this Period

40.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Karl Stone

Mailing Address 123 Sewall Ave. Apt. 2B

City

Brookline

State

MA

Zip Code

02446-5339

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C57970

Amount of Each Receipt this Period

35.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Carol Stout

Mailing Address 4095 Millagra Dr.

City

Fallbrook

State

CA

Zip Code

92028-8674

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C57972

Amount of Each Receipt this Period

100.00

Receipt

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

175.00

**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 23 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Siegfried Tarasenko

Mailing Address 3203 NE 57th Terr.

City

Gladstone

State

MO

Zip Code

64119-2012

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gray Lab

Occupation  
chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: 90829.C57878

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

James Up de Graff

Mailing Address 700 Sarbonne Rd.

City

Los Angeles

State

CA

Zip Code

90077-3302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C58028

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ramona Upp

Mailing Address 4914 S Newcombe Ct.

City

Littleton

State

CO

Zip Code

80127-7927

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: 90829.C57868

Amount of Each Receipt this Period

100.00

Receipt

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

150.00

**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 24 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Patrick Urbin

Mailing Address 10445 Hartland Rd.

City

Fenton

State

MI

Zip Code

48430-8771

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
General Motors

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C57999

Amount of Each Receipt this Period

40.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Linda Van Wootten

Mailing Address 111 Wren St.

City

New Orleans

State

LA

Zip Code

70124-4125

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

180.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: 90829.C57880

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Linda Van Wootten

Mailing Address 111 Wren St.

City

New Orleans

State

LA

Zip Code

70124-4125

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C58059

Amount of Each Receipt this Period

60.00

Receipt

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

150.00

**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 25 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Mary Wehling

Mailing Address 2201 County Rd. 156

City

Granger

State

TX

Zip Code

76530-5254

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 7 / 2 0 0 9

Transaction ID: 90810.C57415

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Emanuel Weiss

Mailing Address 14561 W Archer Ave.

City

Golden

State

CO

Zip Code

80401-5365

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 4 / 2 0 0 9

Transaction ID: 90829.C58325

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Douglas Wilkerson

Mailing Address 200 Heathwood Rd.

City

Charlotte

State

NC

Zip Code

28211-1916

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 9

Transaction ID: 90829.C57815

Amount of Each Receipt this Period

30.00

Receipt

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

330.00

**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 26 / 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

Barbara Wilmer

Mailing Address 6787 Elwood Rd.

City

San Jose

State

CA

Zip Code

95120-4760

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: 90829.C58032

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Karen Woodbury

Mailing Address 2720 35th Avenue

City

San Francisco

State

CA

Zip Code

94116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
Webmaster

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 0 / 2 0 0 9

Transaction ID: 90912.C58639

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Dorothy Zunker

Mailing Address 5527 Castle Glade

City

San Antonio

State

TX

Zip Code

78218-2803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 9

Transaction ID: 90829.C57924

Amount of Each Receipt this Period

25.00

Receipt

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

100.00

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

7790.00

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

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

FOR LINE NUMBER: PAGE 27 / 44

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Team America PAC

**A.**

Full Name (Last, First, Middle Initial)

BB&T

Mailing Address 440 Maple Ave E

City

Vienna

State

VA

Zip Code

22180-4723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

191.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: 90912.C58663

Amount of Each Receipt this Period

0.03

Interest Received

**B.**

Full Name (Last, First, Middle Initial)

BB&T

Mailing Address 440 Maple Ave E

City

Vienna

State

VA

Zip Code

22180-4723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

191.22

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: 90912.C58660

Amount of Each Receipt this Period

0.10

Interest Received

**C.**

Full Name (Last, First, Middle Initial)

BB&T

Mailing Address 440 Maple Ave E

City

Vienna

State

VA

Zip Code

22180-4723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.66

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: 90912.C58661

Amount of Each Receipt this Period

46.44

Interest Received

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

46.57

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

46.57

# **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 28 / 44

<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)  
Team America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Corporate Payroll Services	<b>Transaction ID:</b> 90912.E3897 <b>Date of Disbursement</b>																				
Mailing Address 1803 Research Blvd Ste 300	<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>1</td><td>4</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		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	4		2	0	0	9												
<table border="1"> <tr> <td>City Rockville</td> <td>State MD</td> <td>Zip Code 20850-6108</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll taxes</td> <td rowspan="2"> <input type="text"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Rockville	State MD	Zip Code 20850-6108	Purpose of Disbursement Payroll taxes		<input type="text"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>632.16</td> </tr> </table>	632.16											
City Rockville	State MD	Zip Code 20850-6108																			
Purpose of Disbursement Payroll taxes		<input type="text"/> Category/ Type																			
Candidate Name																					
632.16																					
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>B.</b> Full Name (Last, First, Middle Initial) Corporate Payroll Services	<b>Transaction ID:</b> 90912.E3896 <b>Date of Disbursement</b>																				
Mailing Address 1803 Research Blvd Ste 300	<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>1</td><td>4</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		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	4		2	0	0	9												
<table border="1"> <tr> <td>City Rockville</td> <td>State MD</td> <td>Zip Code 20850-6108</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll fees</td> <td rowspan="2"> <input type="text"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Rockville	State MD	Zip Code 20850-6108	Purpose of Disbursement Payroll fees		<input type="text"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>45.25</td> </tr> </table>	45.25											
City Rockville	State MD	Zip Code 20850-6108																			
Purpose of Disbursement Payroll fees		<input type="text"/> Category/ Type																			
Candidate Name																					
45.25																					
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>C.</b> Full Name (Last, First, Middle Initial) Corporate Payroll Services	<b>Transaction ID:</b> 90912.E3906 <b>Date of Disbursement</b>																				
Mailing Address 1803 Research Blvd Ste 300	<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>3</td><td>1</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		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
<table border="1"> <tr> <td>City Rockville</td> <td>State MD</td> <td>Zip Code 20850-6108</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll taxes</td> <td rowspan="2"> <input type="text"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Rockville	State MD	Zip Code 20850-6108	Purpose of Disbursement Payroll taxes		<input type="text"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>605.60</td> </tr> </table>	605.60											
City Rockville	State MD	Zip Code 20850-6108																			
Purpose of Disbursement Payroll taxes		<input type="text"/> Category/ Type																			
Candidate Name																					
605.60																					
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) ▼																				

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

1283.01

**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 29 / 44

<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)  
Team America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Corporate Payroll Services	<b>Transaction ID:</b> 90912.E3905 <b>Date of Disbursement</b>																				
Mailing Address 1803 Research Blvd Ste 300	<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>3</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	9													
City Rockville State MD Zip Code 20850-6108	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll fees Candidate Name	<table border="1"> <tr> <td colspan="10">39.80</td> </tr> </table>	39.80																			
39.80																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL FEES</b>																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Alexander & MacGregor, Inc.	<b>Transaction ID:</b> 90912.E3891 <b>Date of Disbursement</b>																				
Mailing Address PO Box 40580	<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>7</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	7		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	7		2	0	9													
City Washington State DC Zip Code 20016-0580	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement noncand specific mailing Candidate Name	<table border="1"> <tr> <td colspan="10">4000.00</td> </tr> </table>	4000.00																			
4000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>NONCAND SPECIFIC MAILING</b>																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Image Direct	<b>Transaction ID:</b> 90912.E3882 <b>Date of Disbursement</b>																				
Mailing Address 4400 Wedgewood Blvd., Unit N	<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>1</td><td>0</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	0		2	0	9													
City Frederick State MD Zip Code 21703-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement -noncand specific mailing Candidate Name	<table border="1"> <tr> <td colspan="10">1271.16</td> </tr> </table>	1271.16																			
1271.16																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>-NONCAND SPECIFIC MAILING</b>																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

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

**5310.96**

**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 30 / 44

<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)  
Team America PAC

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) Image Direct</p> <p>Mailing Address 4400 Wedgewood Blvd., Unit N</p> <p>City Frederick State MD Zip Code 21703-</p> <p>Purpose of Disbursement -noncand specific mailing</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><b>Transaction ID:</b> 90912.E3888  <b>Date of Disbursement</b>  <div>08 / 17 / 2009</div></p> <p>Amount of Each Disbursement this Period  <div>4268.77</div></p> <p>-NONCAND SPECIFIC MAILING</p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) Junttila Studios, Inc</p> <p>Mailing Address 13575 Melville Ln</p> <p>City Chantilly State VA Zip Code 20151-2495</p> <p>Purpose of Disbursement -noncand specific mailing</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><b>Transaction ID:</b> 90912.E3878  <b>Date of Disbursement</b>  <div>08 / 10 / 2009</div></p> <p>Amount of Each Disbursement this Period  <div>583.00</div></p> <p>-NONCAND SPECIFIC MAILING</p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) C&amp;E Printing</p> <p>Mailing Address 446 Maple Ave., East</p> <p>City Vienna State VA Zip Code 22180-</p> <p>Purpose of Disbursement Printing and stationary</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><b>Transaction ID:</b> 90912.E3879  <b>Date of Disbursement</b>  <div>08 / 10 / 2009</div></p> <p>Amount of Each Disbursement this Period  <div>435.88</div></p> <p>PRINTING AND STATIONARY</p>

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

**5287.65**

**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 31 / 44

<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)  
Team America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Quill	<b>Transaction ID:</b> 90912.E3880 <b>Date of Disbursement</b>
Mailing Address PO Box 37600	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 9</div> </div>
City Philadelphia State PA Zip Code 19101-0600 Purpose of Disbursement Office supplies Candidate Name	Amount of Each Disbursement this Period <div>190.89</div>
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) ▼	OFFICE SUPPLIES
<b>B.</b> Full Name (Last, First, Middle Initial) Direct TV	<b>Transaction ID:</b> 90912.E3881 <b>Date of Disbursement</b>
Mailing Address PO Box 60036	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 9</div> </div>
City Los Angeles State CA Zip Code 90060- Purpose of Disbursement Office expense Candidate Name	Amount of Each Disbursement this Period <div>36.75</div>
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) ▼	OFFICE EXPENSE
<b>C.</b> Full Name (Last, First, Middle Initial) MC Technologies	<b>Transaction ID:</b> 90912.E3876 <b>Date of Disbursement</b>
Mailing Address 6419 White Oak Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 9</div> </div>
City Broad Run State VA Zip Code 20137- Purpose of Disbursement Office expenses Candidate Name	Amount of Each Disbursement this Period <div>478.80</div>
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) ▼	OFFICE EXPENSES

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

**706.44**

**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 32 / 44

<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)  
Team America PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Aristotle	<b>Transaction ID:</b> 90912.E3915
	Mailing Address 205 Pennsylvania Ave SE	Date of Disbursement <div> <div>08</div> <div>01</div> <div>2009</div> </div>
	City Washington State DC Zip Code 20003-1164	<b>Amount of Each Disbursement this Period</b>
	Purpose of Disbursement Credit card fees Candidate Name	<div>136.61</div>
	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:	Category/Type
		<b>CREDIT CARD FEES</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Aristotle	<b>Transaction ID:</b> 90912.E3914
	Mailing Address 205 Pennsylvania Ave SE	Date of Disbursement <div> <div>08</div> <div>01</div> <div>2009</div> </div>
	City Washington State DC Zip Code 20003-1164	<b>Amount of Each Disbursement this Period</b>
	Purpose of Disbursement Credit card fees Candidate Name	<div>100.50</div>
	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:	Category/Type
		<b>CREDIT CARD FEES</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Aristotle	<b>Transaction ID:</b> 90912.E3916
	Mailing Address 205 Pennsylvania Ave SE	Date of Disbursement <div> <div>08</div> <div>08</div> <div>2009</div> </div>
	City Washington State DC Zip Code 20003-1164	<b>Amount of Each Disbursement this Period</b>
	Purpose of Disbursement Credit card fees Candidate Name	<div>64.85</div>
	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:	Category/Type
		<b>CREDIT CARD FEES</b>

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

**301.96**

**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)

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<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)  
Team America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Aristotle Mailing Address 205 Pennsylvania Ave SE	<b>Transaction ID:</b> 90912.E3917 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 8 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20003-1164 Purpose of Disbursement Credit card fees 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 <div>30.70</div> <b>CREDIT CARD FEES</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Aristotle Mailing Address 205 Pennsylvania Ave SE City Washington State DC Zip Code 20003-1164 Purpose of Disbursement Credit card fees 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) ▼	<b>Transaction ID:</b> 90912.E3918 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 4 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>48.95</div> <b>CREDIT CARD FEES</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Aristotle Mailing Address 205 Pennsylvania Ave SE City Washington State DC Zip Code 20003-1164 Purpose of Disbursement Credit card fees 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) ▼	<b>Transaction ID:</b> 90912.E3919 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>30.20</div> <b>CREDIT CARD FEES</b>

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

**109.85**

**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 34 / 44

<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)  
Team America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Aristotle	<b>Transaction ID:</b> 90912.E3921 <b>Date of Disbursement</b>																				
Mailing Address 205 Pennsylvania Ave SE	<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>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	2		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	2		2	0	9													
City Washington State DC Zip Code 20003-1164	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit card fees Candidate Name	<table border="1"> <tr> <td colspan="10">64.62</td> </tr> </table>	64.62																			
64.62																					
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) ▼																				
CREDIT CARD FEES																					
<b>B.</b> Full Name (Last, First, Middle Initial) Aristotle	<b>Transaction ID:</b> 90912.E3920 <b>Date of Disbursement</b>																				
Mailing Address 205 Pennsylvania Ave SE	<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>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	2		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	2		2	0	9													
City Washington State DC Zip Code 20003-1164	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit card fees Candidate Name	<table border="1"> <tr> <td colspan="10">27.85</td> </tr> </table>	27.85																			
27.85																					
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) ▼																				
CREDIT CARD FEES																					
<b>C.</b> Full Name (Last, First, Middle Initial) Aristotle	<b>Transaction ID:</b> 90912.E3922 <b>Date of Disbursement</b>																				
Mailing Address 205 Pennsylvania Ave SE	<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>7</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	7		2	0	9	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	7		2	0	9													
City Washington State DC Zip Code 20003-1164	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit card fees Candidate Name	<table border="1"> <tr> <td colspan="10">39.50</td> </tr> </table>	39.50																			
39.50																					
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) ▼																				
CREDIT CARD FEES																					

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

131.97

**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 35 / 44

<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)  
Team America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Aristotle	<b>Transaction ID:</b> 90912.E3923 <b>Date of Disbursement</b>																				
Mailing Address 205 Pennsylvania Ave SE	<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>9</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	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	9		2	0	0	9												
City Washington State DC Zip Code 20003-1164	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>4</td><td>1</td><td>.</td><td>1</td><td>5</td> </tr> </table>	4	1	.	1	5															
4	1	.	1	5																	
Purpose of Disbursement Credit card fees Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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>CREDIT CARD FEES</b>																					
<b>B.</b> Full Name (Last, First, Middle Initial) BB&T	<b>Transaction ID:</b> 90912.E3912 <b>Date of Disbursement</b>																				
Mailing Address 440 Maple Ave E	<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>1</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	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	1		2	0	0	9												
City Vienna State VA Zip Code 22180-4723	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1</td><td>5</td><td>7</td><td>.</td><td>6</td><td>4</td> </tr> </table>	1	5	7	.	6	4														
1	5	7	.	6	4																
Purpose of Disbursement Bank service charges Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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>BANK SERVICE CHARGES</b>																					
<b>C.</b> Full Name (Last, First, Middle Initial) BB&T	<b>Transaction ID:</b> 90912.E3924 <b>Date of Disbursement</b>																				
Mailing Address 440 Maple Ave E	<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>1</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	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	1		2	0	0	9												
City Vienna State VA Zip Code 22180-4723	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2</td><td>5</td><td>.</td><td>2</td><td>2</td> </tr> </table>	2	5	.	2	2															
2	5	.	2	2																	
Purpose of Disbursement Bank service charge Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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>BANK SERVICE CHARGE</b>																					

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

**224.01**

**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 36 / 44

<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)  
Team America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Angela Buchanan Mailing Address 11321 Hunt Farm Ln.	<b>Transaction ID:</b> 90912.E3887 <b>Date of Disbursement</b> <div> <div>08</div> <div>17</div> <div>2009</div> </div>
City Oakton State VA Zip Code 22124- Purpose of Disbursement Reimbursement meeting expense 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) ▼	<b>Amount of Each Disbursement this Period</b> <div>163.67</div> <b>REIMBURSEMENT MEETING EXP-ENSE</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Marcus Epstein Mailing Address 1612 King St. City Alexandria State VA Zip Code 22314- Purpose of Disbursement Reimbursement for email project 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) ▼	<b>Transaction ID:</b> 90912.E3889 <b>Date of Disbursement</b> <div> <div>08</div> <div>21</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1105.00</div> <b>REIMBURSEMENT FOR EMAIL PROJECT</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Nicholas Gatz Mailing Address 6603 Ocean Point City Mentor State OH Zip Code 44060- Purpose of Disbursement Payroll 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) ▼	<b>Transaction ID:</b> 90912.E3898 <b>Date of Disbursement</b> <div> <div>08</div> <div>15</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>740.75</div> <b>PAYROLL</b>

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

**2009.42**

**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 37 / 44

<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)  
Team America PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Nicholas Gatz	<b>Transaction ID:</b> 90912.E3890
	Mailing Address 6603 Ocean Point	Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 9
	City Mentor State OH Zip Code 44060-	<b>Amount of Each Disbursement this Period</b>
	Purpose of Disbursement Reimbursement for Internet project Candidate Name	155.00
	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) ▼	Category/ Type
		<b>REIMBURSEMENT FOR INTERNET PROJECT</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Nicholas Gatz	<b>Transaction ID:</b> 90912.E3907
	Mailing Address 6603 Ocean Point	Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9
	City Mentor State OH Zip Code 44060-	<b>Amount of Each Disbursement this Period</b>
	Purpose of Disbursement Payroll Candidate Name	740.75
	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) ▼	Category/ Type
		<b>PAYROLL</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Kristin Larsen	<b>Transaction ID:</b> 90912.E3899
	Mailing Address 11322 Hunt Farm Lane	Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 9
	City Oakton State VA Zip Code 22124-1201	<b>Amount of Each Disbursement this Period</b>
	Purpose of Disbursement payroll Candidate Name	590.81
	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) ▼	Category/ Type
		<b>PAYROLL</b>

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

**1486.56**

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

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
Team America PAC

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 39 / 44

<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)  
Team America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Tyler Lowe	<b>Transaction ID:</b> 90912.E3894 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 7 / 2 0 0 9</div> </div>
Mailing Address 1733 Wycliffe Street	
City Bedford State VA Zip Code 24523-	<b>Amount of Each Disbursement this Period</b> <div>16.00</div>
Purpose of Disbursement Reimbursement for office expenses Candidate Name	<div>Category/Type</div>
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>REIMBURSEMENT FOR OFFICE EXPENSES</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Tyler Lowe	<b>Transaction ID:</b> 90912.E3909 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 9</div> </div>
Mailing Address 1733 Wycliffe Street	
City Bedford State VA Zip Code 24523-	<b>Amount of Each Disbursement this Period</b> <div>376.76</div>
Purpose of Disbursement Payroll Candidate Name	<div>Category/Type</div>
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>PAYROLL</b>
<b>C.</b> Full Name (Last, First, Middle Initial) P. Daniel Orlich	<b>Transaction ID:</b> 90912.E3877 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 9</div> </div>
Mailing Address 107 East St NE	
City Vienna State VA Zip Code 22180-3615	<b>Amount of Each Disbursement this Period</b> <div>556.00</div>
Purpose of Disbursement Rent Candidate Name	<div>Category/Type</div>
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>RENT</b>

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

948.76

**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 40 / 44

<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)  
Team America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) P. Daniel Orlich	<b>Transaction ID:</b> 90912.E3895 <b>Date of Disbursement</b>																				
Mailing Address 107 East St NE	<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>7</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	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	7		2	0	0	9												
City Vienna State VA Zip Code 22180-3615	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Rent	<table border="1"> <tr> <td>556.00</td> </tr> </table>	556.00																			
556.00																					
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>RENT</b>																				
<b>B.</b> Full Name (Last, First, Middle Initial) Vern Robinson	<b>Transaction ID:</b> 90912.E3886 <b>Date of Disbursement</b>																				
Mailing Address 2713 Edinberg Dr.	<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>1</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		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	6		2	0	0	9												
City Winston Salem State NC Zip Code 27103-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement List rental	<table border="1"> <tr> <td>296.00</td> </tr> </table>	296.00																			
296.00																					
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>LIST RENTAL</b>																				
<b>C.</b> Full Name (Last, First, Middle Initial) Tom Tancredo	<b>Transaction ID:</b> 90912.E3892 <b>Date of Disbursement</b>																				
Mailing Address 8184 W. Eastman Place	<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>7</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	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	7		2	0	0	9												
City Denver State CO Zip Code 80227-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting fee	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																					
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>CONSULTING FEE</b>																				

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

**5852.00**

**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 41 / 44

<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)  
Team America PAC

<b>A.</b> Full Name (Last, First, Middle Initial) USPS	<b>Transaction ID:</b> 90912.E3883 <b>Date of Disbursement</b>
Mailing Address Laywers Rd & Church St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 1 / 2 0 0 9</div> </div>
City Vienna State VA Zip Code 22180- Purpose of Disbursement Postage Candidate Name	Amount of Each Disbursement this Period <div>352.00</div>
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) ▼	POSTAGE
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon	<b>Transaction ID:</b> 90912.E3884 <b>Date of Disbursement</b>
Mailing Address PO Box 17577	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 0 9</div> </div>
City Baltimore State MD Zip Code 21297-0513 Purpose of Disbursement Phone bill Candidate Name	Amount of Each Disbursement this Period <div>209.88</div>
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) ▼	PHONE BILL
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> 90912.E3885 <b>Date of Disbursement</b>
Mailing Address PO Box 17120	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 0 9</div> </div>
City Tucson State AZ Zip Code 85731-7120 Purpose of Disbursement Phone bill Candidate Name	Amount of Each Disbursement this Period <div>235.71</div>
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) ▼	PHONE BILL

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

**797.59**

**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 42 / 44

<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)  
Team America PAC

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) Katelynn White</p> <p>Mailing Address 10179 Hillington Court</p> <p>City Vienna State VA Zip Code 22182-</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 90912.E3901  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 0 9</div> </p> <p>Amount of Each Disbursement this Period  <div>184.70</div> </p> <p><b>PAYROLL</b></p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) Katelynn White</p> <p>Mailing Address 10179 Hillington Court</p> <p>City Vienna State VA Zip Code 22182-</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 90912.E3910  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 9</div> </p> <p>Amount of Each Disbursement this Period  <div>220.89</div> </p> <p><b>PAYROLL</b></p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) John Wittman</p> <p>Mailing Address 5464 Charleston Woods Drive</p> <p>City Middletown State OH Zip Code 45044-</p> <p>Purpose of Disbursement Reimb office expense</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><b>Transaction ID:</b> 90912.E3875  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 7 / 2 0 0 9</div> </p> <p>Amount of Each Disbursement this Period  <div>13.00</div> </p> <p><b>REIMB OFFICE EXPENSE</b></p>

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

**418.59**

**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 43 / 44

<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)  
Team America PAC

A.

Full Name (Last, First, Middle Initial)  
John Wittman

Mailing Address 5464 Charleston Woods Drive

City State Zip Code  
Middletown OH 45044-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 90912.E3902

Date of Disbursement

/   /

Amount of Each Disbursement this Period

183.42

PAYROLL

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

183.42

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

26030.73

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 44 / 44

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Team America PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alexander & MacGregor, Inc.Nature of Debt (Purpose):  
non cand specific mailing  
costs

Mailing Address PO Box 40580

City	State	ZIP Code
Washington	DC	20016-0580

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS90912.E3911

Amount Incurred This Period

4000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

4000.00

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

4000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

4000.00