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FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED

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OME IS COMAIL CENTED

					Office associated	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typin over the lines.	g, type	FE4M5		
Gairentiffic	Advancem	ent Fior	Amesi	19al I		لبيا
				لللل		لبيا
ADDRESS (number and street)	1177 Wick	FIOITIDI PION	nit Rid			
Check if different than previously reported. (ACC)	Word Ki	MESTIONIA			22852-1	
2. FEC IDENTIFICATION N	JMBER ▼	CITY A	STA	ATE 🛦	ZIP CODI	E 🛦
0005166	82 3.		EW N) OR	AMI (A)	ENDED	
4. TYPE OF REPORT (Choose One)	Report	eb 20 (M2)	May 20 (M5)	Aug 2		Nov 20 (M11) Non-Election (ear Only)
(a) Quarterly Reports:			un 20 (M6)			Dec 20 (M12) Non-Election (ear Only)
April 15 Quarterly Report (C		pr 20 (M4) J	ul 20 (M7)	General (Jan 31 (YE)
July 15 Quarterly Report (C	PRF-Flection			Special (1	السيا	,
October 15 Quarterly Report (C	23)	/	, LA.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	in the	
Year-End Report (\	(E) Elec	ction on		<u></u>	State of	
July 31 Mid-Year Report (Non-electio Year Only) (MY)	(d) 30-Day POST-Election Report for the:	,	i) [Runoff (30	OR) S	Special (30S)
Termination Report (TER)	·	etion on	· · · · ·	· · · · · · · · · · · · · · · · · · ·	in the State of	
5. Covering Period	7 611 20	through	09	30	20.12	
I certify that I have examined th	nis Report and to the best	of my knowledge and b	elief it is true,	correct and	complete.	
Type or Print Name of Treasure	r Benjama	South				
Signature of Treasurer	enjanin ?	Sett	Date	, NO	1 20	2012
NOTE: Submission of false, erron	eous, or incomplete informa	tion may subject the pers	on signing this	Report to the	e penalties of 2 U.	S.C. §437g.
Office Use Only					FEC FORM Rev. 12/200	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS Page 2 FEC Form 3X (Rev. 02/2003) Write or Type Committee Name Report Covering the Period: From: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... OQ (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on

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

Schedule C and/or Schedule D)

For further information contact:

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

Toll Free 809-424-9530 Local 202-694-1100

FE6AN026

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DETAILED SUMMARY PAGE

of Receipts FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name A) vencemon 03 To: Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... (ii) Unitemized (iii) TOTAL (add 1) OU Lines 11(a)(i) and (ii)...... 0 (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Linee 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received..... 14. Loan Repayments Received...... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b))... 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).......▶ 20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tills Ferrou	Calefidal Teal-to-Date
	(i) Federal Share	VOD	000
	(ii) Non-Federal Share	000	000
	(b) Other Federal Operating	442	~ ^ >
	Expenditures(c) Total Operating Expenditures	ODO	
	(add 21(a)(i), (a)(ii), and (b))▶	000	000
22.	Transfers to Affiliated/Other Party	(12)	ΛΛΧ
23.	CommitteeaContributions to Federal Candidates/Committees	000	
24.	and Other Political Committees Independent Expenditures		
	(use Schedule E)	060	0.00
25.	(2 U.S.C. §441a(d)) (use Schedule F)	000	0000
26.	Loan Repayments Made	D.08	000
27.	Loans Made	000	0,00
28.	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	2008	000
	(b) Political Party Committees	0.00	
	(such as PACs)	000	000
	(d) Total Contribution Refunds	000	$\wedge \wedge \wedge$
	(add Lines 28(a), (b), and (c))▶		
29.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schoolule HS)		
	(from Schedule H6) (i) Federal Share	\mathcal{C} 60	$\mathcal{O}(\mathcal{O})$
	(ii) "Levin" Share	000	000
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	000	000
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	150
31.	Total Disbursements (add Lines 21(c), 22,		7677
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	$\frac{1500}{1500}$
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	QQD.	1,500
		•	

(subtract Line 37 from Line 36)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 III. Net Contributions/Operating Ex-COLUMN A **COLUMN B Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

NAM	NAME OF COMMITTEE (In Full)				
	Scientific	Advancement For A	merce		
NAME OF ACCOUNT COOSIG682					
		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE		
1.	RECEIPTS FROM PERSONS (a) Itemized(Use Schedule L-A)	008	20,08		
	(b) Uniternized	0.00	0.00		
	(c) Total	\mathcal{O} DD	POOD		
2.	OTHER RECEIPTS	<u>, 000</u>	20.08		
3.	TOTAL RECEIPTS	0,00	2000		
	(Add Lines 1c and 2)				
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)				
	(a) Voter Registration	7			
	(b) Voter ID				
	(c) GOTV				
	(d) Generic Campaign	7			
	(e) Total				
5.	OTHER DISBURSEMENTS	7			
6.	TOTAL DISBURSEMENTS(Add Lines 4e and 5)	77			
7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)	5,00	, , , <u>, , , , , , , , , , , , , , , , </u>		
8.	RECEIPTS	ODD	1500		
9.	SUBTOTAL(Add Lines 7 and 8)	, , , , , , , , , , , , , , , , , , ,	500		
10.	DISBURSEMENTS(From Line 6)	015b	000		
11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)	000	500		

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

PAGE OF Use separate schedule(s)

TIENIZED RECEIPTS OF LEVIN FUNDS	Aggregation Page	(check only one) 1a 2
Any information copied from such Reports and Statements may not or for commercial purposes, other than using the name and address		
NAME OF COMMITTEE (In Full) Hasaraw Rahmen		
Full Name (Last, First, Middle Initial) / Full Organization Name A. Mailing Address	V 100 -	Date of Receipt
City State Name of Employer or Principal Place of Business Student Occupation	Zip Code	Amount of Each Receipt this Period COC Aggregate Year-to-Date
Full Name (Last, First, Middle Initial) / Full Organization Name B. Mailing Address		Date of Receipt
City State Name of Employer or Principal Place of Business	Zip Code	Amount of Each Receipt this Period
Occupation		Aggregate Year-to-Date
Full Name (Last, First, Middle Initial) / Full Organization Name C. Mailing Address		Date of Receipt
Mailing Address City State	Zip Code	Amount of Each Receipt this Period
Name of Employer or Principal Place of Business Occupation		Aggregate Year-to-Date
Full Name (Last, First, Middle Initial) / Full Organization Name D. Mailing Address		Date of Receipt
City State Name of Employer or Principal Place of Business	Zip Code	Amount of Each Receipt this Period
Occupation		Aggregate Year-to-Date
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number only)	•	

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

The FEC added this page to the end of this filing t	
Hand Delivered	Date of Receipt
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USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 10/24/10
Delivery Confirmation™ or Signat	ure Confirmation™ Label ✓
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Ne	xt Business Day Delivery
Received from House Records & Registration O	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Smp	10/31/11
PREPARER	DATE PREPARED

(3/2005)