

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED

2013 MAR 25 PM 12:20

FEC MAIL CENTER

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Federal Managers Association Political Action Committee

ADDRESS (number and street)

1641 Prince Street



Check if different
than previously
reported. (ACC)

Alexandria

VA

22314

-2818

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00164848

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15
Quarterly Report (Q1)



July 15
Quarterly Report (Q2)



October 15
Quarterly Report (Q3)



January 31
Year-End Report (YE)



July 31 Mid-Year
Report (Non-election
Year Only) (MY)



Termination Report
(TER)

(b) Monthly
Report
Due On:



Feb 20 (M2)



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 (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the
State of

MM / DD / YYYY

(d) 30-Day
POST-Election
Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the
State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

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

Katie Maddocks

Signature of Treasurer

Katie Maddocks

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

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. 02/2003)

13031050903

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Federal Managers Association Political Action Committee

Report Covering the Period:

From:

MM / DD / YYYY
02 / 01 / 2013

To:

MM / DD / YYYY
02 / 28 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2013		49,728.25
(b) Cash on Hand at Beginning of Reporting Period.....	5,073.30	
(c) Total Receipts (from Line 19).....	1,174.75	26,798.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	5,190.805	52,408.05
7. Total Disbursements (from Line 31).....	2,314.00	2,814.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	49,594.05	49,594.05
9. 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 Schedule C and/or Schedule D).....	-----	



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

13031050904

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Federal Managers Association Political Action Committee

Report Covering the Period:

From:

02 01 2013

To:

02 28 2013

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).....

(ii) Unitemized.....

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

(b) Political Party Committees.....

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

(d) Total Contributions (add Lines 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).....▶

272 -
899 -
1171 -

1171 -

375

1174.75

1174.75

544 -
2128 -
2672 -

2672 -

780

2679.80

2679.80

13031050905

Page 4

COLUMN B
Calendar Year-to-Date


- 2314-

- 50.0 -

-

-

-

- 

- _____

- _____

1. *Chlorophyll a* (Chl *a*)
 2. *Chlorophyll b* (Chl *b*)
 3. *Chlorophyll c* (Chl *c*)
 4. *Chlorophyll d* (Chl *d*)
 5. *Chlorophyll e* (Chl *e*)
 6. *Chlorophyll f* (Chl *f*)
 7. *Chlorophyll g* (Chl *g*)
 8. *Chlorophyll h* (Chl *h*)
 9. *Chlorophyll i* (Chl *i*)
 10. *Chlorophyll j* (Chl *j*)
 11. *Chlorophyll k* (Chl *k*)
 12. *Chlorophyll l* (Chl *l*)
 13. *Chlorophyll m* (Chl *m*)
 14. *Chlorophyll n* (Chl *n*)
 15. *Chlorophyll o* (Chl *o*)
 16. *Chlorophyll p* (Chl *p*)
 17. *Chlorophyll q* (Chl *q*)
 18. *Chlorophyll r* (Chl *r*)
 19. *Chlorophyll s* (Chl *s*)
 20. *Chlorophyll t* (Chl *t*)
 21. *Chlorophyll u* (Chl *u*)
 22. *Chlorophyll v* (Chl *v*)
 23. *Chlorophyll w* (Chl *w*)
 24. *Chlorophyll x* (Chl *x*)
 25. *Chlorophyll y* (Chl *y*)
 26. *Chlorophyll z* (Chl *z*)
 27. *Chlorophyll aa* (Chl *aa*)
 28. *Chlorophyll ab* (Chl *ab*)
 29. *Chlorophyll ac* (Chl *ac*)
 30. *Chlorophyll ad* (Chl *ad*)
 31. *Chlorophyll ae* (Chl *ae*)
 32. *Chlorophyll af* (Chl *af*)
 33. *Chlorophyll ag* (Chl *ag*)
 34. *Chlorophyll ah* (Chl *ah*)
 35. *Chlorophyll ai* (Chl *ai*)
 36. *Chlorophyll aj* (Chl *aj*)
 37. *Chlorophyll ak* (Chl *ak*)
 38. *Chlorophyll al* (Chl *al*)
 39. *Chlorophyll am* (Chl *am*)
 40. *Chlorophyll an* (Chl *an*)
 41. *Chlorophyll ao* (Chl *ao*)
 42. *Chlorophyll ap* (Chl *ap*)
 43. *Chlorophyll aq* (Chl *aq*)
 44. *Chlorophyll ar* (Chl *ar*)
 45. *Chlorophyll as* (Chl *as*)
 46. *Chlorophyll at* (Chl *at*)
 47. *Chlorophyll au* (Chl *au*)
 48. *Chlorophyll av* (Chl *av*)
 49. *Chlorophyll aw* (Chl *aw*)
 50. *Chlorophyll ax* (Chl *ax*)
 51. *Chlorophyll ay* (Chl *ay*)
 52. *Chlorophyll az* (Chl *az*)
 53. *Chlorophyll aza* (Chl *aza*)
 54. *Chlorophyll abz* (Chl *abz*)
 55. *Chlorophyll acz* (Chl *acz*)
 56. *Chlorophyll adz* (Chl *adz*)
 57. *Chlorophyll aez* (Chl *aez*)
 58. *Chlorophyll afz* (Chl *afz*)
 59. *Chlorophyll agz* (Chl *agz*)
 60. *Chlorophyll ahz* (Chl *ahz*)
 61. *Chlorophyll aiz* (Chl *aiz*)
 62. *Chlorophyll ajz* (Chl *ajz*)
 63. *Chlorophyll akz* (Chl *akz*)
 64. *Chlorophyll alz* (Chl *alz*)
 65. *Chlorophyll amz* (Chl *amz*)
 66. *Chlorophyll anz* (Chl *anz*)
 67. *Chlorophyll aoz* (Chl *aoz*)
 68. *Chlorophyll apz* (Chl *apz*)
 69. *Chlorophyll aqz* (Chl *aqz*)
 70. *Chlorophyll arz* (Chl *arz*)
 71. *Chlorophyll asz* (Chl *asz*)
 72. *Chlorophyll atz* (Chl *atz*)
 73. *Chlorophyll auz* (Chl *auz*)
 74. *Chlorophyll avz* (Chl *avz*)
 75. *Chlorophyll awz* (Chl *awz*)
 76. *Chlorophyll axz* (Chl *axz*)
 77. *Chlorophyll ayz* (Chl *ayz*)
 78. *Chlorophyll azz* (Chl *azz*)
 79. *Chlorophyll azaa* (Chl *aza*)
 80. *Chlorophyll abz* (Chl *abz*)
 81. *Chlorophyll acz* (Chl *acz*)
 82. *Chlorophyll adz* (Chl *adz*)
 83. *Chlorophyll aez* (Chl *aez*)
 84. *Chlorophyll afz* (Chl *afz*)
 85. *Chlorophyll agz* (Chl *agz*)
 86. *Chlorophyll ahz* (Chl *ahz*)
 87. *Chlorophyll aiz* (Chl *aiz*)
 88. *Chlorophyll ajz* (Chl *ajz*)
 89. *Chlorophyll akz* (Chl *akz*)
 90. *Chlorophyll alz* (Chl *alz*)
 91. *Chlorophyll amz* (Chl *amz*)
 92. *Chlorophyll anz* (Chl *anz*)
 93. *Chlorophyll aoz* (Chl *aoz*)
 94. *Chlorophyll apz* (Chl *apz*)
 95. *Chlorophyll aqz* (Chl *aqz*)
 96. *Chlorophyll arz* (Chl *arz*)
 97. *Chlorophyll asz* (Chl *asz*)
 98. *Chlorophyll atz* (Chl *atz*)
 99. *Chlorophyll auz* (Chl *auz*)
 100. *Chlorophyll avz* (Chl *avz*)
 101. *Chlorophyll awz* (Chl *awz*)
 102. *Chlorophyll axz* (Chl *axz*)
 103. *Chlorophyll ayz* (Chl *ayz*)
 104. *Chlorophyll azz* (Chl *azz*)
 105. *Chlorophyll azaa* (Chl *aza*)
 106. *Chlorophyll abz* (Chl *abz*)
 107. *Chlorophyll acz* (Chl *acz*)
 108. *Chlorophyll adz* (Chl *adz*)
 109. *Chlorophyll aez* (Chl *aez*)
 110. *Chlorophyll afz* (Chl *afz*)
 111. *Chlorophyll agz* (Chl *agz*)
 112. *Chlorophyll ahz* (Chl *ahz*)
 113. *Chlorophyll aiz* (Chl *aiz*)
 114. *Chlorophyll ajz* (Chl *ajz*)
 115. *Chlorophyll akz* (Chl *akz*)
 116. *Chlorophyll alz* (Chl *alz*)
 117. *Chlorophyll amz* (Chl *amz*)
 118. *Chlorophyll anz* (Chl *anz*)
 119. *Chlorophyll aoz* (Chl *aoz*)
 120. *Chlorophyll apz* (Chl *apz*)
 121. *Chlorophyll aqz* (Chl *aqz*)
 122. *Chlorophyll arz* (Chl *arz*)
 123. *Chlorophyll asz* (Chl *asz*)
 124. *Chlorophyll atz* (Chl *atz*)
 125. *Chlorophyll auz* (Chl *auz*)
 126. *Chlorophyll avz* (Chl *avz*)
 127. *Chlorophyll awz* (Chl *awz*)
 128. *Chlorophyll axz* (Chl *axz*)
 129. *Chlorophyll ayz* (Chl *ayz*)
 130. *Chlorophyll azz* (Chl *azz*)
 131. *Chlorophyll azaa* (Chl *aza*)
 132. *Chlorophyll abz* (Chl *abz*)
 133.

- _____

-

- _____

- 7814 -

- 2814-

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-
penditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

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
(subtract Line 37 from Line 36)▶

16171-
16171-

2672-
2672-

13031050907

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1 OF 4

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Federal Managers Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sariano, Jeffrey

Mailing Address

827 Kemp Meadow Drive

City

Chesapeake

State

VA

Zip Code

23320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept. of Defense

Occupation

Manager

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1,200 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

300 -

Full Name (Last, First, Middle Initial)

B. Beyl, Gerald

Mailing Address

3605 SE Scholt Lane

City

Port Orchard

State

WA

Zip Code

98367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept. of Defense

Occupation

Manager

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

200 -

Full Name (Last, First, Middle Initial)

C. Hollingsworth, Paul

Mailing Address

147 Pepperell Road

City

Kittery Point

State

ME

Zip Code

03905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept. of Defense

Occupation

Manager

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

200 -

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

700 -

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 2 OF 4

(check only one)

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

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NAME OF COMMITTEE (In Full)

Federal Managers Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Plasse, Michelle

Mailing Address

2890 SE Duchess Ct.

City

Port Orchard

State

WA

Zip Code

98367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept. of Defense

Occupation

Manager

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

20 -

Full Name (Last, First, Middle Initial)

B. Topness, Daniel

Mailing Address

1163 NW Monterey Ct.

City

Silverdale

State

WA

Zip Code

98383

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept. of Defense

Occupation

Manager

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

20 -

Full Name (Last, First, Middle Initial)

C. Kelley, James

Mailing Address

301 Panther Trail

City

Harelock

State

NC

Zip Code

28532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept. of Defense

Occupation

Manager

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

20 -

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

60 -

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 3 OF 4

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Federal Managers Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Parker, Christine

Mailing Address

209 Fairways Drive

City

Warner Robins

State

GA

Zip Code

31088

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept. of Defense

Occupation

Manager

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8.0 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

20 -

Full Name (Last, First, Middle Initial)

B. Niehaus, Patricia

Mailing Address

429 Morales Ct.

City

Vacaville

State

CA

Zip Code

95488

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept. of Defense

Occupation

Manager

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2.20 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

30 -

Full Name (Last, First, Middle Initial)

C. Quilan, Dora

Mailing Address

1405 Wilshire Ct.

City

Jacksonville

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept. of Defense

Occupation

Manager

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1.20 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

5 -

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

5.5 -

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 4 OF 4

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Federal Managers Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lew, Leonard

Mailing Address

7025 Wavercrest Way

City

Sacramento

State

CA

Zip Code

95831

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

1.00 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

4.2 -

Full Name (Last, First, Middle Initial)

B. Oppidisano, Richard

Mailing Address

6 York Ct.

City

Latham

State

NY

Zip Code

12110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

7.9 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

3.5 -

Full Name (Last, First, Middle Initial)

C. Smith, George

Mailing Address

252 North Bridge Creek

City

Switzerland

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

7.0 -

Date of Receipt

02 / 15 / 2013

Amount of Each Receipt this Period

1.0 -

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

8.7 -

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

27.2 -

13031050911

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 / OF /

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Federal Managers Association Political Action Committee

Full Name (Last, First, Middle Initial)

A.

Date of Disbursement

Capitol Advantage

MM / DD / YYYY
02 / 28 / 2013

Mailing Address

PO Box 809

City

State

Zip Code

Newington

VA

22122

Purpose of Disbursement

Operating Expense

003

Category/
Type

Amount of Each Disbursement this Period

2,314.00

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

B.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

C.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

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

2,314.00

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.

☐ Hand Delivered Date of Receipt

☐ USPS First Class Mail Postmarked

☒ USPS Registered/Certified Postmarked (R/C)
3/20/13

☐ USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐

☐ USPS Express Mail Postmarked

☐ Postmark Illegible

☐ No Postmark


☐ Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office 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

 3/25/13
PREPARER DATE PREPARED