

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

2011 OCT 21 AM 8:42 Office Use Only

12FE4M5 FEC MAIL CENTER

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

GREG AGUILAR FOR CONGRESS

ADDRESS (number and street)

500 48TH AVE

Check if different than previously reported. (ACC)

EAST MOLINE ILL 61244

2. FEC IDENTIFICATION NUMBER

C00501809

3. IS THIS REPORT NEW OR AMENDED CITY STATE ZIP CODE STATE DISTRICT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
X October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
Election on MM/DD/YYYY in the State of

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

General (30G) Runoff (30R) Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period 07'01'2011 through 09'30'2011

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 JAMES M LAIRD

Signature of Treasurer

[Handwritten Signature]

Date

10'13'2011

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 3 (Revised 02/2003)

11030680906

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

GREG AGUILAR FOR CONGRESS

Report Covering the Period: From: ^M0^M7 / ^D0^D1 / ^Y20^Y1^Y1 To: ^M0^M9 / ^D30 / ^Y20^Y1^Y1

11030680907

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	\$ 10,221.64	\$ 10,221.64
(b) Total Contribution Refunds (from Line 20(d))	\$ 0.00	\$ 0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	\$ 10,221.64	\$ 10,221.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$ 6,998.58	\$ 6,998.58
(b) Total Offsets to Operating Expenditures (from Line 14).....	\$ 0.00	\$ 0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	\$ 6,998.58	\$ 6,998.58
8. Cash on Hand at Close of Reporting Period (from Line 27).....	\$ 1,471.99	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

GREG AGUILAR FOR CONGRESS

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 07 / 01 / 2011 To: ^{M M / D D / Y Y Y Y} 09 / 30 / 2011

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	\$ 7,075.00	\$ 7,075.00
(ii) Unitemized.....	\$ 2,906.52	\$ 2,906.52
(iii) TOTAL of contributions from individuals ▶	\$ 9,981.52	\$ 9,981.52
(b) Political Party Committees.....	\$ 0.00	\$ 0.00
(c) Other Political Committees (such as PACs).....	\$ 240.12	\$ 240.12
(d) The Candidate.....	\$ 0.00	\$ 0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	\$ 10,221.64	\$ 10,221.64

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the Candidate.....	\$ 0.00	\$ 0.00
(b) All Other Loans.....	\$ 0.00	\$ 0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	\$ 0.00	\$ 0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

\$ 0.00	\$ 0.00
---------	---------

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

\$ 0.23	\$ 0.23
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16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

\$ 10,221.87	\$ 10,221.87
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11030680908

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	\$ 6,998.58	\$ 6,998.58
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$ 0.00	\$ 0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	\$ 0.00	\$ 0.00
(b) Of All Other Loans	\$ 0.00	\$ 0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	\$ 0.00	\$ 0.00
20. 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 Committeea (such as PACs).....	\$ 0.00	\$ 0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	\$ 0.00	\$ 0.00
21. OTHER DISBURSEMENTS	\$ 1,751.30	\$ 1,751.30
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	\$ 8,749.88	\$ 8,749.88

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	\$ 0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	\$ 10,221.87
25. SUBTOTAL (add Line 23 and Line 24).....	\$ 10,221.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	\$ 8,749.88
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	\$ 1,471.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 3	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
GREG AGUILAR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SAUCEDO, ROBERTO		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2011
Mailing Address 3429 2ND ST		Amount of Each Receipt this Period , \$200.00
City EAST MOLINE	State Zip Code IL 61244	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , \$200.00
Name of Employer DEERE HARVESTER	Occupation LABORER	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , \$200.00	

Full Name (Last, First, Middle Initial) B. SAUCEDO, ROBERTO		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2011
Mailing Address 3429 2ND ST		Amount of Each Receipt this Period , \$325.00
City EAST MOLINE	State Zip Code IL 61244	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , \$525.00
Name of Employer DEERE HARVESTER	Occupation LABORER	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , \$525.00	

Full Name (Last, First, Middle Initial) C. BRIBRIESCO, MARIA		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2011
Mailing Address 2114 NICHOLAS CT		Amount of Each Receipt this Period , \$300.00
City BETTENDORF	State Zip Code IA 52722	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , \$300.00
Name of Employer N/A	Occupation RETIRED	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , \$300.00	

SUBTOTAL of Receipts This Page (optional).....	, \$825.00
TOTAL This Period (last page this line number only).....	, , .

11030680910

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

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

FOR LINE NUMBER: PAGE 2 OF 3
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
GREG AGUILAR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JACOBS, DENNIS

Mailing Address
3511 8TH ST

City **EAST MOLINE** State **IL** Zip Code **61244**

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
, \$250.00

Date of Receipt
M M / D D / Y Y Y Y
09 29 2011

Amount of Each Receipt this Period
, \$250.00

B. Full Name (Last, First, Middle Initial)
GARVIN, STEPHEN

Mailing Address
2624 N DITTMER

City **DAVENPORT** State **IA** Zip Code **52806**

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

Name of Employer **DEERE & CO** Occupation **IT**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
, \$2,000.00

Date of Receipt
M M / D D / Y Y Y Y
09 01 2011

Amount of Each Receipt this Period
, \$2,000.00
CONTRIBUTION IN-KIND

C. Full Name (Last, First, Middle Initial)
HOEG, MICHAEL P

Mailing Address
231 37TH AVE

City **EAST MOLINE** State **IL** Zip Code **61244**

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

Name of Employer **DEERE & CO** Occupation **IT**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
, \$2,000.00

Date of Receipt
M M / D D / Y Y Y Y
09 01 2011

Amount of Each Receipt this Period
, \$2,000.00
CONTRIBUTION IN-KIND

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

, \$4,250.00

11030680911

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 3 OF 3	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
GREG AGUILAR FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. TERRONEZ, Tom

Mailing Address
220 N MAIN ST

City **DAVENPORT, IA** State **IA** Zip Code **52801**

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

Name of Employer **SELF-EMPLOYED** Occupation **COMPUTER TECH**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
\$ 2,000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 01 / 2011

Amount of Each Receipt this Period
\$ 2,000.00
CONTRIBUTION IN-KIND

~~Full Name (Last, First, Middle Initial)~~

~~Mailing Address~~

~~City~~ ~~State~~ ~~Zip Code~~

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

~~Name of Employer~~ ~~Occupation~~

~~Receipt For:
 Primary General
 Other (specify)~~

~~Election Cycle-to-Date~~

~~Date of Receipt
M M / D D / Y Y Y Y~~

~~Amount of Each Receipt this Period~~

~~Full Name (Last, First, Middle Initial)~~

~~Mailing Address~~

~~City~~ ~~State~~ ~~Zip Code~~

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

~~Name of Employer~~ ~~Occupation~~

~~Receipt For:
 Primary General
 Other (specify)~~

~~Election Cycle-to-Date~~

~~Date of Receipt
M M / D D / Y Y Y Y~~

~~Amount of Each Receipt this Period~~

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

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

\$ 2,000.00

\$ 7,075.00

11030680912

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

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

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NAME OF COMMITTEE (In Full)
GREG AGUILAR FOR CONGRESS

Full Name (Last, First, Middle Initial)
ACT BLUE

A. Mailing Address
14 ARROW ST SUITE 11

City **CAMBRIDGE** State **MA** Zip Code **02138**

FEC ID number of contributing federal political committee. **C00401224**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date
, 240.12

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2011

Amount of Each Receipt this Period
, 240.12

Full Name (Last, First, Middle Initial) _____

B. Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date
, , .

Date of Receipt
M M / D D / Y Y Y Y
~~_____~~

Amount of Each Receipt this Period
~~, , .~~

Full Name (Last, First, Middle Initial) _____

C. Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date
, , .

Date of Receipt
M M / D D / Y Y Y Y
~~_____~~

Amount of Each Receipt this Period
~~, , .~~

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

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

, , .

, 240.12

11030680913

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 3	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
GREG AGUILAR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GARVIN, STEPHEN		Date of Disbursement 09 / 01 / 20 11	
Mailing Address 2624 N DITMER		Amount of Each Disbursement this Period \$2,000.00	
City DAVENPORT	State IA		Zip Code 52806
Purpose of Disbursement CONTRIBUTION IN-KIND			Category/ Type 001
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. HOEG, MICHAEL P		Date of Disbursement 09 / 01 / 20 11	
Mailing Address 231 37th AVE		Amount of Each Disbursement this Period \$2,000.00	
City EAST MOLINE	State IL		Zip Code 61244
Purpose of Disbursement CONTRIBUTION IN-KIND			Category/ Type 001
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. TERRONEZ, TOM		Date of Disbursement 09 / 01 / 20 11	
Mailing Address 220 N MAIN ST		Amount of Each Disbursement this Period \$2,000.00	
City DAVENPORT	State IA		Zip Code 52801
Purpose of Disbursement CONTRIBUTION IN-KIND			Category/ Type 001
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	\$6,000.00
TOTAL This Period (last page this line number only).....	\$6,000.00

11030680914

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

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

FOR LINE NUMBER: (check only one)
 17
 18
 19a
 19b
 20a
 20b
 20c
 21

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NAME OF COMMITTEE (In Full)
GREG AGUILAR FOR CONGRESS

A. QUAD CITY PRESS

Full Name (Last, First, Middle Initial)
QUAD CITY PRESS

Date of Disbursement
 M M / D D / Y Y Y Y
09 / 02 / 20 11

Mailing Address
1325 15TH ST

City **MOLINE** State **IL** Zip Code **61265**

Purpose of Disbursement
CAMPAIGN MATERIALS

Candidate Name
006
 Category/Type

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period
\$,305.00

B. QUAD CITY PRESS

Full Name (Last, First, Middle Initial)
QUAD CITY PRESS

Date of Disbursement
 M M / D D / Y Y Y Y
09 / 20 / 20 11

Mailing Address
1325 15TH ST

City **MOLINE** State **IL** Zip Code **61265**

Purpose of Disbursement
CAMPAIGN MATERIALS

Candidate Name
006
 Category/Type

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period
\$,442.00

C. SAM'S CLUB # 8238

Full Name (Last, First, Middle Initial)
SAM'S CLUB # 8238

Date of Disbursement
 M M / D D / Y Y Y Y
09 / 04 / 20 11

Mailing Address
3845 ELMORE AVE

City **DAVENPORT** State **IA** Zip Code **52807**

Purpose of Disbursement
PARADE CANDY

Candidate Name
007
 Category/Type

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period
\$,183.44

SUBTOTAL of Disbursements This Page (optional)..... **\$,930.44**

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

11030680915

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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PAGE 3 OF 3

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NAME OF COMMITTEE (In Full)
GREG AGUILAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. **SAM'S CLUB # 8238**

Mailing Address
3845 ELMORE AVE

City **DAVENPORT** State **IA** Zip Code **52807**

Purpose of Disbursement
PARADE CANDY

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement

M M / D D / Y Y Y Y
09 / 16 / 20 11

Amount of Each Disbursement this Period

\$ 68.14

007
Category/
Type

Full Name (Last, First, Middle Initial)

B.

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

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

\$ 68.14

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

\$ 6,998.58

11030680916

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
10/15/11

USPS Registered/Certified Postmarked (R/C)

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

AMW
 PREPARER
 (3/2005)

10/21/11
 DATE PREPARED

11030680917