

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
Associations Inc. PAC/Associa PAC

ADDRESS (number and street) 5401 N. Central Expressway
Suite 300
 Check if different than previously reported. (ACC)
Dallas TX 75205

2. **FEC IDENTIFICATION NUMBER** C00413856
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 (12S)
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 02 01 2010 through 02 28 2010

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 Matthew Davis

Signature of Treasurer Electronically Filed by Matthew Davis Date 03 02 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									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Associations Inc. PAC/Associa PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		19379.95
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	22831.59									
(c) Total Receipts (from Line 19)	3688.66	7250.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	26520.25	26630.03								
7. Total Disbursements (from Line 31)	6010.36	6120.14								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20509.89	20509.89								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Associations Inc. PAC/Associa PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

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)	350.00	350.00
(ii) Unitemized	3338.66	6900.08
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3688.66	7250.08
(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)	3688.66	7250.08
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3688.66	7250.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3688.66	7250.08

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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.....	6010.36	6120.14
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))..	6010.36	6120.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6010.36	6120.14

DETAILED SUMMARY PAGE
of Disbursements

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	3688.66	7250.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3688.66	7250.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 10
	<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	

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)
Associations Inc. PAC/Associa PAC

A.

Full Name (Last, First, Middle Initial) John Carona		Date of Receipt MM / DD / YYYY 02 / 28 / 2010
Mailing Address P.o Box 600035		Transaction ID: PR768419261
City Dallas	State TX	Zip Code 75360
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Associa - (TCC Staff Management Inc)	Occupation CEO- Corporate	P/R Deduction (\$100.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.

Full Name (Last, First, Middle Initial) Walter Dobson		Date of Receipt MM / DD / YYYY 02 / 28 / 2010
Mailing Address 13100 Hillcrest Blvd		Transaction ID: PR768424261
City Keller	State TX	Zip Code 76244
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer Associa - (TCC Staff Management Inc)	Occupation Chief Information Officer	P/R Deduction (\$5.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	350.00

**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 7 / 10

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Associations Inc. PAC/Associa PAC

A. Full Name (Last, First, Middle Initial) Ellyn Bogdanoff Campaign Mailing Address 908 South Andrews Avenue City Fort Lauderdale State FL Zip Code 33316 Purpose of Disbursement Ellyn Bogdanoff, STATE HOUSE 91st FL Candidate Name Ellyn Bogdanoff Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 91	Transaction ID: 1953036 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Ellyn Bogdanoff, STATE HO- USE 91st FL
	Category/ Type 011
B. Full Name (Last, First, Middle Initial) Miguel Diaz de la Portilla Campaign Mailing Address 121 Alhambra Plaza City Goral Gables State FL Zip Code 33134 Purpose of Disbursement Miguel de la Portilla, STATE SENATE FL Candidate Name Miguel Diaz de la Portilla Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District:	Transaction ID: 1953209 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Miguel de la Portilla, ST- ATE SENATE FL
	Category/ Type 011
C. Full Name (Last, First, Middle Initial) Steve Oelrich Campaign Mailing Address 4131 Northwest 28th Lane Suite 7 City Gainesville State FL Zip Code 32606 Purpose of Disbursement Steve Oelrich, STATE HOUSE 14th FL Candidate Name Steve Oelrich Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 14	Transaction ID: 1953210 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Steve Oelrich, STATE HOUSE 14th FL
	Category/ Type 011

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Associations Inc. PAC/Associa PAC

<p>A. Full Name (Last, First, Middle Initial) David Simmons Campaign</p> <p>Mailing Address Post Office Box 161611</p> <p>City Altamonte Springs State FL Zip Code 32716</p> <p>Purpose of Disbursement David Simmons, STATE SENATE 22nd FL</p> <p>Candidate Name FL Sen. David Simmons</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 1953211 Date of Disbursement 02 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>David Simmons, STATE SENA- TE 22nd FL</p>
<p>B. Full Name (Last, First, Middle Initial) John Thrasher Campaign</p> <p>Mailing Address 4963 Beach Blvd.</p> <p>City Jacksonville State FL Zip Code 32207</p> <p>Purpose of Disbursement John Thrasher, STATE HOUSE 8th FL</p> <p>Candidate Name John Thrasher</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 1953212 Date of Disbursement 02 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>John Thrasher, STATE HOUSE 8th FL</p>
<p>C. Full Name (Last, First, Middle Initial) Jeff Atwater Campaign</p> <p>Mailing Address P.O. Box 14366</p> <p>City North Palm Beach State FL Zip Code 33408</p> <p>Purpose of Disbursement Jeff Atwater, STATE SENATE 25th FL</p> <p>Candidate Name Jeff Atwater</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 1953213 Date of Disbursement 02 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Jeff Atwater, STATE SENATE 25th FL</p>

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Associations Inc. PAC/Associa PAC

A. Full Name (Last, First, Middle Initial) Matt Gaetz Campaign <hr/> Mailing Address P.O. Box 88 <hr/> City Fort Walton Beach State FL Zip Code 32549 Purpose of Disbursement Matt Gaetz, STATE HOUSE 4th FL Candidate Name FL Rep. Matt Gaetz Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1953214 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00 Matt Gaetz, STATE HOUSE 4th FL

B. Full Name (Last, First, Middle Initial) Debbie Mayfield Campaign <hr/> Mailing Address P.O. Box 644127 <hr/> City Vero Beach State FL Zip Code 32964 Purpose of Disbursement Debbie Mayfield, STATE HOUSE 80th FL Candidate Name Debbie Mayfield Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 80 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1953215 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00 Debbie Mayfield, STATE HOUSE 80th FL

C. Full Name (Last, First, Middle Initial) Joe Negron Campaign <hr/> Mailing Address P.O. Box 1816 <hr/> City Stuart State FL Zip Code 34995 Purpose of Disbursement Joe Negron, STATE SENATE 28th FL Candidate Name Joe Negron Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1953216 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00 Joe Negron, STATE SENATE 28th FL

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Associations Inc. PAC/Associa PAC

<p>A. Full Name (Last, First, Middle Initial) Kevin Rader Campaign</p> <p>Mailing Address 6586 Hypoluxo Road #332</p> <p>City Lake Worth State FL Zip Code 33467</p> <p>Purpose of Disbursement Kevin Rader, STATE HOUSE 78th FL</p> <p>Candidate Name Kevin Rader</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 78</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 1953217 Date of Disbursement 02 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Kevin Rader, STATE HOUSE 78th FL</p>
<p>B. Full Name (Last, First, Middle Initial) Scott Randolph Campaign</p> <p>Mailing Address 701 East South Street Suite 100</p> <p>City Orlando State FL Zip Code 32801</p> <p>Purpose of Disbursement Scott Randolph, STATE HOUSE 36th FL</p> <p>Candidate Name Scott Randolph</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 36</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 1953218 Date of Disbursement 02 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Scott Randolph, STATE HOU- SE 36th FL</p>
<p>C. Full Name (Last, First, Middle Initial) Maria Sachs Campaign</p> <p>Mailing Address 203 NE 1st Avenue</p> <p>City Delray Beach State FL Zip Code 33444</p> <p>Purpose of Disbursement Maria Sachs, STATE SENATE 30th FL</p> <p>Candidate Name Maria Sachs</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 1953219 Date of Disbursement 02 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Maria Sachs, STATE SENATE 30th FL</p>

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	6000.00