

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 HEARPAC OF HEARING INDUSTRIES ASSOCIATION

ADDRESS (number and street) 1444 I St., NW, Suite 700 Washington DC 20005 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00437798 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, 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 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 07 / 01 / 2013 through 12 / 31 / 2013

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 Jerome Ruzicka

Signature of Treasurer Jerome Ruzicka [Electronically Filed] Date 01 / 22 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="32556.37"/>	<input type="text" value="32556.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33206.37"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="24000.00"/>	<input type="text" value="52150.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="57206.37"/>	<input type="text" value="84706.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21500.00"/>	<input type="text" value="49000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="35706.37"/>	<input type="text" value="35706.37"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Report Covering the Period: From:  /  /  To:  /  /

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).....	24000.00	51550.00
(ii) Unitemized .....	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	24000.00	51650.00
(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) .....	24000.00	51650.00
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	500.00
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 Transfers (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))..... ▶	24000.00	52150.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	24000.00	52150.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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)		
(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.....	21500.00	49000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	21500.00	49000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21500.00	49000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

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) .....	24000.00	51650.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24000.00	51650.00
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: PAGE 6 OF 16  
(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)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Full Name (Last, First, Middle Initial)  
**A. Andrew Bopp**

Mailing Address 2133 Tunlaw Rd. NW

City Washington State DC Zip Code 20007

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

Name of Employer Bostrom Corp. Occupation Director of Government Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 25 / 2013**

**Transaction ID : SA11AI.5471**

Amount of Each Receipt this Period **500.00**

Full Name (Last, First, Middle Initial)  
**B. Brian Crannell**

Mailing Address 1151 Maplewood Drive

City Itasca State IL Zip Code 60143

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

Name of Employer Knowles Electronics Occupation Sr. Director Marketing & Bus. Dev.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 14 / 2013**

**Transaction ID : SA11AI.5465**

Amount of Each Receipt this Period **1000.00**

Full Name (Last, First, Middle Initial)  
**c. B. Scott Davis**

Mailing Address 190 Waverly Place 5B

City New York State NY Zip Code 10014

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

Name of Employer Siemens Hearing Instruments Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **12 / 04 / 2013**

**Transaction ID : SA11AI.5472**

Amount of Each Receipt this Period **5000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **6500.00**

**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 7 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Full Name (Last, First, Middle Initial)  
**A. Francesca DiNota**

Mailing Address 22 Post Gate Road

City Trumbull State CT Zip Code 06611

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

Name of Employer Widex USA, Inc Occupation Senior VP of Finance & Operations

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 06 / 2013  
**Transaction ID : SA11AI.5463**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Kimberly Herman**

Mailing Address 7100 Mark Terrace Drive

City Edina State MN Zip Code 55439

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

Name of Employer GN ReSound Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 17 / 2013  
**Transaction ID : SA11AI.5468**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. Peer Lauritsen**

Mailing Address 27 Ebersohl Circle

City Whitehouse Station State NJ Zip Code 08889

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

Name of Employer Oticon, Inc Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 11 / 2013  
**Transaction ID : SA11AI.5466**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

**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: (check only one)	PAGE 8 OF 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

**A. Karen Reierson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4904 Park Avenue S.  
 City Minneapolis State MN Zip Code 55417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Starkey Labs. Occupation Corporate Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 07 / 2013  
**Transaction ID : SA11AI.5464**  
 Amount of Each Receipt this Period 1000.00

**B. Carole M. Rogin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 East Road, #10E  
 City Delray Beach State FL Zip Code 33483  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bostrom Occupation Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 16 / 2013  
**Transaction ID : SA11AI.5467**  
 Amount of Each Receipt this Period 1000.00

**C. Brandon Sawalich**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6425 Beach Rd.  
 City Eden Prairie State MN Zip Code 55344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Starkey labs Occupation VP Sales and Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 12 / 2013  
**Transaction ID : SA11AI.5459**  
 Amount of Each Receipt this Period 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> 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: (check only one)	PAGE 9 OF 16
<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)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Full Name (Last, First, Middle Initial) <b>A. Brandon Sawalich</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 04 / 2013 <b>Transaction ID : SA11AI.5473</b>
Mailing Address 6425 Beach Rd.		Amount of Each Receipt this Period 2500.00
City Eden Prairie	State MN	Zip Code 55344
FEC ID number of contributing federal political committee. C	Name of Employer Starkey labs	Occupation VP Sales and Marketing
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. William J. Taylor</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 19 / 2013 <b>Transaction ID : SA11AI.5474</b>
Mailing Address 8512 Highway 212		Amount of Each Receipt this Period 1000.00
City Cologne	State MN	Zip Code 55322
FEC ID number of contributing federal political committee. C	Name of Employer Sonion	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Gordon Walker</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2013 <b>Transaction ID : SA11AI.5460</b>
Mailing Address 828 S. Oak St.		Amount of Each Receipt this Period 2500.00
City Hinsdale	State IL	Zip Code 60521
FEC ID number of contributing federal political committee. C	Name of Employer Knowles Electronics	Occupation General Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	24000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Full Name (Last, First, Middle Initial)

**A. JIM GERLACH**

Mailing Address 649 DEEP HOLLOW LANE

City State Zip Code  
CHESTER SPRINGS PA 19425

Purpose of Disbursement

Candidate Name  
**JIM GERLACH FOR CONGRESS COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: PA District: 06

Date of Disbursement

/  /   
08 / 01 / 2013

**Transaction ID : SB23.5487**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. JIM GERLACH**

Mailing Address 649 DEEP HOLLOW LANE

City State Zip Code  
CHESTER SPRINGS PA 19425

Purpose of Disbursement

Candidate Name  
**JIM GERLACH FOR CONGRESS COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: PA District: 06

Date of Disbursement

/  /   
11 / 14 / 2013

**Transaction ID : SB23.5497**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. THOMAS RICHARD HARKIN**

Mailing Address 528 N 43RD ST #85

City State Zip Code  
CUMMING IA 50061

Purpose of Disbursement

Candidate Name  
**TO ORGANIZE A MAJORITY PAC (TOMPAC)**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /   
10 / 28 / 2013

**Transaction ID : SB23.5493**

Amount of Each Disbursement this Period

1000.00

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

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

2500.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Full Name (Last, First, Middle Initial)

**A. DEAN HELLER**

Mailing Address PO BOX 371907

City LAS VEGAS State NV Zip Code 89137

Purpose of Disbursement  
For Debt Retirement - 2012 Election

Candidate Name  
**HELLER FOR SENATE**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: NV District: 00

Date of Disbursement

/  /

**Transaction ID : SB23.5489**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. DEAN HELLER**

Mailing Address PO BOX 371907

City LAS VEGAS State NV Zip Code 89137

Purpose of Disbursement  
For Debt Retirement - 2012 Election

Candidate Name  
**HELLER FOR SENATE**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: NV District: 00

Date of Disbursement

/  /

**Transaction ID : SB23.5495**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. DEAN HELLER**

Mailing Address PO BOX 371907

City LAS VEGAS State NV Zip Code 89137

Purpose of Disbursement

Candidate Name  
**HELLER FOR SENATE**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: NV District: 00

Date of Disbursement

/  /

**Transaction ID : SB23.5510**

Amount of Each Disbursement this Period

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

**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 checked="" 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)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Full Name (Last, First, Middle Initial)

**A. AMY KLOBUCHAR**

Mailing Address PO BOX 4146

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement

Candidate Name  
**FOLLOW THE NORTH STAR FUND**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: MN District:

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2013

Transaction ID : **SB23.5496**

Amount of Each Disbursement this Period

1000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. AMY KLOBUCHAR**

Mailing Address PO BOX 4146

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement

Candidate Name  
**FOLLOW THE NORTH STAR FUND**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: MN District:

Date of Disbursement

MM / DD / YYYY  
12 / 18 / 2013

Transaction ID : **SB23.5512**

Amount of Each Disbursement this Period

1000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. LEONARD LANCE**

Mailing Address PO BOX 225

City COLONIA State NJ Zip Code 07067

Purpose of Disbursement

Candidate Name  
**LANCE FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

Transaction ID : **SB23.5482**

Amount of Each Disbursement this Period

1000.00

Category/  
Type

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

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

3000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Full Name (Last, First, Middle Initial)

**A. LEONARD LANCE**

Mailing Address PO BOX 225

City COLONIA State NJ Zip Code 07067

Purpose of Disbursement

Candidate Name

**LANCE FOR CONGRESS**

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : SB23.5509**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. THOMAS LATHAM**

Mailing Address PO BOX 8237

City DES MOINES State IA Zip Code 50301

Purpose of Disbursement

Candidate Name

**IOWANS FOR LATHAM**

Office Sought:  House  Senate  President

State: IA District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 11 / 2013

**Transaction ID : SB23.5477**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. THOMAS LATHAM**

Mailing Address PO BOX 8237

City DES MOINES State IA Zip Code 50301

Purpose of Disbursement

Candidate Name

**IOWANS FOR LATHAM**

Office Sought:  House  Senate  President

State: IA District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2013

**Transaction ID : SB23.5498**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Full Name (Last, First, Middle Initial)

**A. DEVIN G NUNES**

Mailing Address P.O. Box 6545  
PO BOX 130

City Visalia State CA Zip Code 93290

Purpose of Disbursement

Candidate Name  
**DEVIN NUNES CAMPAIGN COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: CA District: 21

Date of Disbursement

/  /   
12 / 11 / 2013

**Transaction ID : SB23.5508**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. PETER G OLSON**

Mailing Address PO BOX 16381

City SUGAR LAND State TX Zip Code 77496

Purpose of Disbursement

Candidate Name  
**OLSON FOR CONGRESS COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: TX District: 22

Date of Disbursement

/  /   
11 / 12 / 2013

**Transaction ID : SB23.5504**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. PETER ROSKAM**

Mailing Address 141 SHELLEY LANE

City WHEATON State IL Zip Code 60187

Purpose of Disbursement

Candidate Name  
**ROSKAM FOR CONGRESS COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: IL District: 06

Date of Disbursement

/  /   
12 / 03 / 2013

**Transaction ID : SB23.5499**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Full Name (Last, First, Middle Initial)

**A. MIKE THOMPSON**

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement

Candidate Name  
**VICTORY IN NOVEMBER ELECTION PAC (VINEPAC)**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 18 / 2013

**Transaction ID : SB23.5491**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MIKE MR. THOMPSON**

Mailing Address Post Office Box 10541

City Napa State CA Zip Code 94581

Purpose of Disbursement

Candidate Name  
**MIKE THOMPSON FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: CA District: 01

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
12 / 04 / 2013

**Transaction ID : SB23.5507**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Rep. DINA TITUS**

Mailing Address 1637 TRAVOIS CIRCLE

City LAS VEGAS State NV Zip Code 89119

Purpose of Disbursement

Candidate Name  
**TITUS FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼

State: NV District: 01

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 18 / 2013

**Transaction ID : SB23.5488**

Amount of Each Disbursement this Period

1000.00

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

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

4000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**HEARPAC OF HEARING INDUSTRIES ASSOCIATION**

Full Name (Last, First, Middle Initial)

**A. Rep. DINA TITUS**

Mailing Address 1637 TRAVOIS CIRCLE

City LAS VEGAS State NV Zip Code 89119

Purpose of Disbursement

Candidate Name  
**TITUS FOR CONGRESS**

Office Sought:  House  
 Senate  
 President  
State: NV District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2013

Transaction ID : **SB23.5506**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. CHRIS VAN HOLLEN**

Mailing Address 10537 ST PAUL STREET

City KENSINGTON State MD Zip Code 20895

Purpose of Disbursement

Candidate Name  
**VAN HOLLEN FOR CONGRESS**

Office Sought:  House  
 Senate  
 President  
State: MD District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2013

Transaction ID : **SB23.5492**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**C. CHRIS VAN HOLLEN**

Mailing Address 10537 ST PAUL STREET

City KENSINGTON State MD Zip Code 20895

Purpose of Disbursement

Candidate Name  
**VAN HOLLEN FOR CONGRESS**

Office Sought:  House  
 Senate  
 President  
State: MD District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		12		2013

Transaction ID : **SB23.5505**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3000.00
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21500.00
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