

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.
JEFF PAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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 / / 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 / / through / /

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 **DAVID BAUER**

Signature of Treasurer **DAVID BAUER** [Electronically Filed] Date / /

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)

Page 2

Write or Type Committee Name

JEFF PAC

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="2012"/>	<input type="text" value=""/>	<input type="text" value="41878.78"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="31508.32"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="23500.00"/>	<input type="text" value="119443.04"/>
(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="55008.32"/>	<input type="text" value="161321.82"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="23762.70"/>	<input type="text" value="130076.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="31245.62"/>	<input type="text" value="31245.62"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

JEFF PAC

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).....	21000.00	54000.00
(ii) Unitemized	0.00	10.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	21000.00	54010.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	22000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	23500.00	76010.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	41933.04
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	1500.00
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))..... ▶	23500.00	119443.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	23500.00	119443.04

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	2762.70	47517.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2762.70	47517.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18500.00	80000.00
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	2500.00	2500.00
(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)).....	2500.00	2500.00
29. Other Disbursements	0.00	58.50
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)) ..	23762.70	130076.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23762.70	130076.20

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	23500.00	76010.00
34. Total Contribution Refunds (from Line 28(d))	2500.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21000.00	73510.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2762.70	47517.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2762.70	47517.70

**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)
JEFF PAC

A. . AGUA CALIENTE BAND OF CAHUILLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 5401 DINAH SHORE DR.
 City State Zip Code
 Palm Springs CA 92264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INDIAN TRIBE SOVEREIGN NATION
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2012
Transaction ID : INCA146
 Amount of Each Receipt this Period
 5000.00

B. MORONGO BAND OF MISSION INDIANS NATIVE AMERICAN RIGHTS FUND
 Full Name (Last, First, Middle Initial)
 Mailing Address 11581 POTRERO RD.
 City State Zip Code
 BANNING CA 92220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INDIAN TRIBE SOVEREIGN NATION
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2012
Transaction ID : INCA147
 Amount of Each Receipt this Period
 2500.00

C. . PICAYUNE RANCHERIA OF THE CHUK
 Full Name (Last, First, Middle Initial)
 Mailing Address 46575 ROAD 417 BLDG. #C
 City State Zip Code
 Coarsegold CA 93614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INDIAN TRIBE SOVEREIGN NATION
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2012
Transaction ID : INCA145
 Amount of Each Receipt this Period
 3000.00

SUBTOTAL of Receipts This Page (optional)..... ► 10500.00
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)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
JEFF PAC

A. BEN MASCARENAS
Full Name (Last, First, Middle Initial)

Mailing Address 6189 N WEST AVE.

City Fresno State CA Zip Code 93711

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

Name of Employer MID-VALLEY LABOR SERVICES INC. Occupation PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 02 / 2012

Transaction ID : INCA162

Amount of Each Receipt this Period 3000.00

B. FRED FRANZIA
Full Name (Last, First, Middle Initial)

Mailing Address 1917-D EDGERBROOK DR.

City Modesto State CA Zip Code 95354

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

Name of Employer WEST COAST GRAPE FARMS Occupation PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 05 / 2012

Transaction ID : INCA163

Amount of Each Receipt this Period 2500.00

C. DANIEL VECCHIARELLI
Full Name (Last, First, Middle Initial)

Mailing Address 1830 W. 38TH AVE.

City Denver State CO Zip Code 80211

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

Name of Employer LEPRINO FOODS Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 05 / 2012

Transaction ID : INCA164

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional).....	10500.00
TOTAL This Period (last page this line number only).....	21000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
JEFF PAC

Full Name (Last, First, Middle Initial)
A. ARMTECH CROP INSURANCE PAC

Mailing Address 7101 82ND ST.

City Lubbock State TX Zip Code 79424

FEC ID number of contributing federal political committee. **C** C00523696

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2012

Transaction ID : INCA170

Amount of Each Receipt this Period
2500.00

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y 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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
JEFF PAC

Full Name (Last, First, Middle Initial)

A. DAVID BAUER

Mailing Address 2150 RIVER PLAZA DR. #150

City State Zip Code
SACRAMENTO CA 95833

Purpose of Disbursement
ACCOUNTING SVC.

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2012

Transaction ID : EXPB149

Amount of Each Disbursement this Period

382.95

Full Name (Last, First, Middle Initial)

B. DAVID BAUER

Mailing Address 2150 RIVER PLAZA DR. #150

City State Zip Code
SACRAMENTO CA 95833

Purpose of Disbursement
ACCOUNTING SVC.

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		20		2012

Transaction ID : EXPB169

Amount of Each Disbursement this Period

575.00

Full Name (Last, First, Middle Initial)

C. CHASE CARDMEMBER SERVICES

Mailing Address P. O. BOX 94014

City State Zip Code
PALATINE IL 60094

Purpose of Disbursement
CREDIT CARD PAYMENT

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		20		2012

Transaction ID : EXPB167

Amount of Each Disbursement this Period

1754.43

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

2712.38

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

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

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NAME OF COMMITTEE (In Full)
JEFF PAC

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address AVIATION DR.

City STERLING State VA Zip Code 20166

Purpose of Disbursement
AIRFARE

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EDTB57EXPB167

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. VIRGIN AMERICA AIRLINES

Mailing Address SAN FRANCISCO AIRPORT

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
AIRFARE

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EDTB56EXPB167

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. TRAMONTI RISTORANTE

Mailing Address 119 E. ATLANTIC AVE.

City DELRAY BEACH State FL Zip Code 33444

Purpose of Disbursement
FUNDRAISING EVENT

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EDTB58EXPB167

Amount of Each Disbursement this Period

[MEMO ITEM]

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)
JEFF PAC

Full Name (Last, First, Middle Initial) A. NAN HAYWORTH FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 24 / 2012
Mailing Address P. O. BOX 394		Transaction ID : EXPB148
City FISHKILL	State NY	
Zip Code 12524	Purpose of Disbursement 011	Amount of Each Disbursement this Period 2500.00
Candidate Name NAN HAYWORTH	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY	District: 18	

Full Name (Last, First, Middle Initial) B. ANN MARIE BUERKLE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 25 / 2012
Mailing Address P. O. BOX 219		Transaction ID : EXPB154
City SYRACUSE	State NY	
Zip Code 13214	Purpose of Disbursement 011	Amount of Each Disbursement this Period 1000.00
Candidate Name ANN BUERKLE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NY	District: 24	

Full Name (Last, First, Middle Initial) C. BASS VICTORY COMMITTEE		Date of Disbursement MM / DD / YYYY 10 / 25 / 2012
Mailing Address P. O. BOX 3451		Transaction ID : EXPB151
City CONCORD	State NH	
Zip Code 03302	Purpose of Disbursement 011	Amount of Each Disbursement this Period 1000.00
Candidate Name CHARLIE BASS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: NH	District: 02	

SUBTOTAL of Disbursements This Page (optional).....▶	4500.00
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 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)
JEFF PAC

Full Name (Last, First, Middle Initial)

A. BENISHEK FOR CONGRESS INC.

Mailing Address P. O. BOX 108

City State Zip Code
GLADSTONE MI 49837

Purpose of Disbursement

011

Category/
Type

Candidate Name

DAN BENISHEK

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Transaction ID : EXPB152

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CANSECO FOR CONGRESS

Mailing Address 10004 WURZBACH #366

City State Zip Code
SANANTONIO TX 78239

Purpose of Disbursement

011

Category/
Type

Candidate Name

QUICO CANSECO

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Transaction ID : EXPB155

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CHRIS GIBSON FOR CONGRESS

Mailing Address P. O. BOX 234

City State Zip Code
SARATOGA SPRINGS NY 12866

Purpose of Disbursement

011

Category/
Type

Candidate Name

CHRIS GIBSON

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Transaction ID : EXPB158

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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**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)
JEFF PAC

Full Name (Last, First, Middle Initial)

A. COFFMAN FOR CONGRESS 2012

Mailing Address 9249 SOUTH BROADWAY, #200-501

City State Zip Code
HIGHLANDS RANCH CO 80129

Purpose of Disbursement

011

Category/
Type

Candidate Name

MIKE COFFMAN

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CO District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : EXPB156

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CRAVAACK FOR CONGRESS CAMPAIGN COMMITTEE

Mailing Address P. O. BOX 40040

City State Zip Code
ST PAUL MN 55104

Purpose of Disbursement

011

Category/
Type

Candidate Name

CHIP CRAVAACK

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MN District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : EXPB157

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FRANK GUINTA

Mailing Address P. O. BOX 877

City State Zip Code
MANCHESTER NH 03105

Purpose of Disbursement

011

Category/
Type

Candidate Name

FRANK GUINTA

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NH District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : EXPB159

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

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**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)
JEFF PAC

Full Name (Last, First, Middle Initial)

A. JIM RENACCI FOR CONGRESS

Mailing Address 150 SMOKERISE DR.

City WADSWORTH State OH Zip Code 44281

Purpose of Disbursement

011

Candidate Name
JIM RENACCI

Category/
Type

Office Sought: House
 Senate
 President
State: OH District: 16

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : EXPB160

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JUDY BIGGERT FOR CONGRESS

Mailing Address P. O. BOX 4198

City NAPERVILLE State IL Zip Code 60567

Purpose of Disbursement

011

Candidate Name
JUDY BIGGERT

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 13

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : EXPB153

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PLUMMER FOR CONGRESS

Mailing Address 343 FOUNTAINS PKWY #102

City FAIRVIEW HEIGHTS State IL Zip Code 62208

Purpose of Disbursement

011

Candidate Name
JASON PLUMMER

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 12

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2012			

Transaction ID : EXPB161

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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**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)
JEFF PAC

Full Name (Last, First, Middle Initial)

A. LANDRY FOR LOUISIANA

Mailing Address P. O. BOX 13816

City State Zip Code
NEW IBERIA LA 70562

Purpose of Disbursement

011

Category/
Type

Candidate Name

JEFF LANDRY

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: LA District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 19 / 2012

Transaction ID : EXPB166

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

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 Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

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 Y Y

Amount of Each Disbursement this Period

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

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

5000.00

18500.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
JEFF PAC

Full Name (Last, First, Middle Initial)

A. PICAYUNE RANCHERIA OF THE CHUK

Mailing Address 46575 ROAD 417 BLDG. #C

City Coarsegold State CA Zip Code 93614

Purpose of Disbursement
REFUND

010

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : EXPB150

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2500.00

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

2500.00