

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
Spending Cuts Over Total Taxation PAC, Inc.

ADDRESS (number and street) P.O. Box 303
 Check if different than previously reported. (ACC)
Alexandria VA 22313

2. **FEC IDENTIFICATION NUMBER** C00494898
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 (12G)
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 04 05 2011 through 06 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 Daniel Haley

Signature of Treasurer Electronically Filed by Daniel Haley Date 07 28 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 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Spending Cuts Over Total Taxation PAC, Inc.

Report Covering the Period: From:

M	M
0	4

D	D
0	5

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1	<table border="1"><tr><td>0.00</td></tr></table>	0.00	<table border="1"><tr><td>0.00</td></tr></table>	0.00
X	Y	Y	Y									
2	0	1	1									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1"><tr><td>0.00</td></tr></table>	0.00										
0.00												
(c) Total Receipts (from Line 19)	<table border="1"><tr><td>21250.00</td></tr></table>	21250.00	<table border="1"><tr><td>21250.00</td></tr></table>	21250.00								
21250.00												
21250.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1"><tr><td>21250.00</td></tr></table>	21250.00	<table border="1"><tr><td>21250.00</td></tr></table>	21250.00								
21250.00												
21250.00												
7. Total Disbursements (from Line 31)	<table border="1"><tr><td>9670.93</td></tr></table>	9670.93	<table border="1"><tr><td>9670.93</td></tr></table>	9670.93								
9670.93												
9670.93												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1"><tr><td>11579.07</td></tr></table>	11579.07	<table border="1"><tr><td>11579.07</td></tr></table>	11579.07								
11579.07												
11579.07												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1"><tr><td>5723.75</td></tr></table>	5723.75										
5723.75												

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
Spending Cuts Over Total Taxation PAC, Inc.

Report Covering the Period: From:

M	M
0	4

D	D
0	5

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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)	2000.00	2000.00
(ii) Unitemized	250.00	250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2250.00	2250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	19000.00	19000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	21250.00	21250.00
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	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))	21250.00	21250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21250.00	21250.00

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.....	1170.93	1170.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1170.93	1170.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	8500.00
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.....	0.00	0.00
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))..	9670.93	9670.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9670.93	9670.93

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)	21250.00	21250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21250.00	21250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1170.93	1170.93
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1170.93	1170.93

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

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

FOR LINE NUMBER: PAGE 6 / 15
(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)
Spending Cuts Over Total Taxation PAC, Inc.

A. Full Name (Last, First, Middle Initial)
Jon Boisclair

Mailing Address 5420 N Ocean Dr
Suite 2306

City State Zip Code
Singer Island FL 33404

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

Name of Employer Occupation
The Advocacy Group Of Counsel

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: SA11AI.4107

Amount of Each Receipt this Period
250.00

Contribution

B. Full Name (Last, First, Middle Initial)
Christopher Scott Corley

Mailing Address 229 N Dobson St

City State Zip Code
Burluson TX 76028

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

Name of Employer Occupation
Corley Consulting, LLC President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: SA11AI.4111

Amount of Each Receipt this Period
250.00

Contribution

C. Full Name (Last, First, Middle Initial)
Robert J. Dotchin

Mailing Address 412 N Saint Asaph St

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
The Advocacy Group Partner

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2011

Transaction ID: SA11AI.4109

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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 / 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Spending Cuts Over Total Taxation PAC, Inc.

A. Full Name (Last, First, Middle Initial)
James Egan, III
Mailing Address 3 Burgess Rd
City Worcester State MA Zip Code 01609
FEC ID number of contributing federal political committee. **C**
Name of Employer Carroll Enterprises Occupation Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 05 / 06 / 2011
Transaction ID: SA11AI.4103
Amount of Each Receipt this Period 250.00
Contribution

B. Full Name (Last, First, Middle Initial)
Jerry J Jasinowski
Mailing Address 3228 Rittenhouse St, NW
City Washington State DC Zip Code 20015
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 05 / 06 / 2011
Transaction ID: SA11AI.4119
Amount of Each Receipt this Period 500.00
Contribution

C. Full Name (Last, First, Middle Initial)
Nicole S. Petrosino
Mailing Address 2328 Champlain St, NW Apt. 304
City Washington State DC Zip Code 20009
FEC ID number of contributing federal political committee. **C**
Name of Employer TIAA CREF Occupation Federal Government Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 05 / 06 / 2011
Transaction ID: SA11AI.4113
Amount of Each Receipt this Period 250.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 1000.00
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 8 / 15

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Spending Cuts Over Total Taxation PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
David Simon

Mailing Address 9406 Old Mount Vernon Rd

City	State	Zip Code
Alexandria	VA	22309

FEC ID number of contributing federal political committee. C

Name of Employer Ideal Innovations, Inc.	Occupation Engineer/Scientist
---	----------------------------------

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	1

Transaction ID: SA11AI.4117

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)	<div style="border: 1px solid black; padding: 2px;">250.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 2px;">2000.00</div>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Spending Cuts Over Total Taxation PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DRIVE

City State Zip Code
RESTON VA 20191

FEC ID number of contributing federal political committee. **C** C00343459

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
05 / 11 / 2011

Transaction ID: SA11C.4121

Amount of Each Receipt this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)
AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1201 L STREET, NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2011

Transaction ID: SA11C.4150

Amount of Each Receipt this Period

5000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
CALIFORNIA DAIRIES FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 475 SOUTH TEGNER

City State Zip Code
TURLOCK CA 95380

FEC ID number of contributing federal political committee. **C** C00349746

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
06 / 16 / 2011

Transaction ID: SA11C.4143

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶

10000.00

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 10 / 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Spending Cuts Over Total Taxation PAC, Inc.

A.	Full Name (Last, First, Middle Initial) EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC		Date of Receipt
	Mailing Address 3699 WILSHIRE BLVD., #1290		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	LOS ANGELES	CA	90010
	FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00088591"/>		Transaction ID: SA11C.4152
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="2000.00"/>	Contribution

B.	Full Name (Last, First, Middle Initial) NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt
	Mailing Address 51 MADISON AVENUE ROOM 1109		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	NEW YORK	NY	10010
	FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00158881"/>		Transaction ID: SA11C.4123
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
		<input type="text" value="5000.00"/>	Contribution

C.	Full Name (Last, First, Middle Initial) TEXTRON INC. POLITICAL ACTION COMMITTEE		Date of Receipt
	Mailing Address 40 WESTMINSTER STREET		<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	PROVIDENCE	RI	02903
	FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00123612"/>		Transaction ID: SA11C.4141
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional) ▶

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 11 / 15	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)
Spending Cuts Over Total Taxation PAC, Inc.

A.	Full Name (Last, First, Middle Initial) THE CHUBB CORPORATION POLITICAL ACTION COMMITTEE-CHUBBPAC		Date of Receipt
	Mailing Address 15 MOUNTAIN VIEW ROAD		<input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	WARREN	NJ	07059
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4125
	<input type="text" value="C"/> C00229203		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text" value="1000.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Contribution	
Aggregate Year-to-Date ▼		<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="19000.00"/>

**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 12 / 15

<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)
Spending Cuts Over Total Taxation PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
Koch & Hoos, LLC

Transaction ID: SB21B.4145
Date of Disbursement

Mailing Address 901 North Washington Street
Suite 102

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

1170.00

Purpose of Disbursement
PAC Accounting/Compliance Services

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1170.00

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

1170.00

**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 13 / 15

<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)
Spending Cuts Over Total Taxation PAC, Inc.

A.	Full Name (Last, First, Middle Initial) BOB CORKER FOR SENATE 2012	Transaction ID: SB23.4139 Date of Disbursement																			
	Mailing Address PO BOX 848	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	8		2	0	1	1												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name ROBERT P JR CORKER	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE INC	Transaction ID: SB23.4140 Date of Disbursement																			
	Mailing Address 175 SOUTH WEST TEMPLE SUITE 650	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	8		2	0	1	1												
	City SALT LAKE CITY State UT Zip Code 84101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name ORRIN G HATCH	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) ROMNEY FOR PRESIDENT INC.	Transaction ID: SB23.4137 Date of Disbursement																			
	Mailing Address 585 COMMERCIAL ST	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	8		2	0	1	1												
	City BOSTON State MA Zip Code 02109	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name MITT ROMNEY	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>7500.00</td></tr></table>	7500.00
7500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 14 / 15

<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)
Spending Cuts Over Total Taxation PAC, Inc.

A.

Full Name (Last, First, Middle Initial)
SNOWE FOR SENATE

Transaction ID: SB23.4138

Date of Disbursement

Mailing Address PO BOX 2012

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	1

City PORTLAND State ME Zip Code 04104

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
OLYMPIA J SNOWE

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: ME District: 00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

8500.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 / 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Spending Cuts Over Total Taxation PAC, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor McDermott Will & Emery LLP			Nature of Debt (Purpose): PAC Legal Fees
Mailing Address 28 State Street			
City Boston	State MA	ZIP Code 02109-1775	

Outstanding Balance Beginning This Period		Transaction ID: SD10.4148	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
5723.75	0.00	5723.75	

1) SUBTOTALS This Period This Page (optional).....	5723.75
2) TOTALS This Period (last page this line number only).....	5723.75
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	5723.75