

**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
COUNTRY FIRST POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 228 S WASHINGTON STREET SUITE 115
▼
 Check if different than previously reported. (ACC)
ALEXANDRIA VA 22314 -

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00457705

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 M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 11 / 01 / 2011 through M M / D D / Y Y Y Y Y Y 11 / 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 Keith Davis

Signature of Treasurer Keith Davis [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 08 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

COUNTRY FIRST POLITICAL ACTION COMMITTEE

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="2011"/>	<input type="text" value="16155.86"/>	<input type="text" value="16155.86"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="99528.88"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="196006.92"/>	<input type="text" value="702763.71"/>
(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="295535.80"/>	<input type="text" value="718919.57"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="42610.60"/>	<input type="text" value="465994.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="252925.20"/>	<input type="text" value="252925.20"/>
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

Write or Type Committee Name

COUNTRY FIRST POLITICAL ACTION COMMITTEE

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).....	9050.00	114385.00
(ii) Unitemized	14467.80	139557.87
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	23517.80	253942.87
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5250.00	49750.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	28767.80	303692.87
12. Transfers From Affiliated/Other Party Committees.....	0.00	9835.48
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).....	1489.12	5471.01
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	165750.00	383764.35
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))..... ▶	196006.92	702763.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	196006.92	702763.71

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

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	36610.60	396394.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	36610.60	396394.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	69500.00
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	100.00
(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	100.00
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)) ..	42610.60	465994.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	42610.60	465994.37

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)	28767.80	303692.87
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28767.80	303592.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	36610.60	396394.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1489.12	5471.01
38. Net Operating Expenditures (subtract Line 37 from Line 36)	35121.48	390923.36

**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 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. DR. MICHAEL BARNARD		Date of Receipt 11 / 03 / 2011 Transaction ID : SA11.3078337
Mailing Address 681 PIFER RD		Amount of Each Receipt this Period 250.00
City HOUSTON	State TX	Zip Code 77024-5432
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation M.D.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MRS. WANLYN BERRY BEJACH		Date of Receipt 11 / 22 / 2011 Transaction ID : SA11.3078513
Mailing Address 10582 MIRA VISTA DRIVE		Amount of Each Receipt this Period 400.00
City SANTA ANA	State CA	Zip Code 92705-2570
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. DR. FREDERICK CONARD		Date of Receipt 11 / 03 / 2011 Transaction ID : SA11.3078400
Mailing Address 22 SUNSET FARM ROAD		Amount of Each Receipt this Period 25.00
City WEST HARTFORD	State CT	Zip Code 06107-1314
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer JEFFERSON RADIOLOGY, PC	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MS. CYNTHIA A. DILLON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2515 K. STREET NW
 APARTMENT 604
 City WASHINGTON State DC Zip Code 20037-2016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REPUBLICANS ABROAD Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 21 / 2011
Transaction ID : SA11.3078446
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

B. JACQUELINE DODD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 W CEDAR ST
 City EL DORADO State AR Zip Code 71730-5310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE BROKER/APPRaiser
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2011
Transaction ID : SA11.3078397
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION

C. MR. CLAYTON S. EMMERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 LIGHTHOUSE LANE
 UNIT 1117
 City HILTON HEAD ISLAND State SC Zip Code 29928-4310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer S.M. BRADFORD COMPANY Occupation RETAIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 29 / 2011
Transaction ID : SA11.3078570
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1325.00
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 OF 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. JEANNETTE EVANS

Mailing Address P.O. BOX 70

City State Zip Code
COWICHE WA 98923-0070

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

Name of Employer Occupation
EVANSFRUITCO.INC. OFFICE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2011
Transaction ID : SA11.3078422

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MRS. CAROLYN S. FRANCISCO

Mailing Address 6912 S. PRINCE CIRCLE

City State Zip Code
LITTLETON CO 80120-3540

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2011
Transaction ID : SA11.3078583

Amount of Each Receipt this Period
200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. ROBERT W. GARTHWAIT SR.

Mailing Address P.O. BOX 1367

City State Zip Code
WATERBURY CT 06721-1367

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

Name of Employer Occupation
SELF-EMPLOYED CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2011
Transaction ID : SA11.3078460

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1700.00

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 9 OF 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MRS. MARIE DIANN GILLESPIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3235 S RIVE RIDGE WAY
 City BOISE State ID Zip Code 83709-3806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 03 / 2011
Transaction ID : SA11.3078389
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION

B. MRS. INGE GROSS
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 MEADOW LAKES
 City EAST WINDSOR State NJ Zip Code 08520-4801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 22 / 2011
Transaction ID : SA11.3078517
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

C. MS. WINIFRED G. HARRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 635 S. PARK CENTRE AVENUE APARTMENT 2107
 City GREEN VALLEY State AZ Zip Code 85614-6280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 29 / 2011
Transaction ID : SA11.3078568
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
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 10 OF 29
	<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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MRS. MARJORIE HART
Full Name (Last, First, Middle Initial)

Mailing Address 3307 NORTH 43RD PLACE

City PHOENIX State AZ Zip Code 85018-6422

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2011

Transaction ID : SA11.3078605

Amount of Each Receipt this Period
 400.00

CONTRIBUTION

B. MR. JAMES P. HEA
Full Name (Last, First, Middle Initial)

Mailing Address 9130 N.W. 11TH COURT

City PLANTATION State FL Zip Code 33322-4902

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

Name of Employer RESOURCE BENEFITS, INC. Occupation INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2011

Transaction ID : SA11.3078326

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

C. MR. DEAN A. HORN
Full Name (Last, First, Middle Initial)

Mailing Address 905 HAMPTON WAY

City TRENT WOODS State NC Zip Code 28562-4530

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2011

Transaction ID : SA11.3078581

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 11 OF 29
	<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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MRS. PAMELA KELLY
Full Name (Last, First, Middle Initial)

Mailing Address 196 N CANYON VIEW DRIVE

City	State	Zip Code
LOS ANGELES	CA	90049-2722

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

Name of Employer	Occupation
LATHAM & WATKINS	ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2011

Transaction ID : SA11.3078423

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. MR. WILLIAM K. MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 2280 AIRPORT ROAD

City	State	Zip Code
PLATTEVILLE	WI	53818-9595

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

Name of Employer	Occupation
WKM PSYCHOLOGY CLINIC	PSYCHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2011

Transaction ID : SA11.3078336

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C. MR. THOMAS A. MISKIMEN
Full Name (Last, First, Middle Initial)

Mailing Address 1244 ARBOR ROAD
APARTMENT 533

City	State	Zip Code
WINSTON SALEM	NC	27104-1149

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2011

Transaction ID : SA11.3078542

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1425.00
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 12 OF 29
	<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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MR. JOHN W. MITCHELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 250 EAST 54TH STREET
 APARTMENT 38D
 City NEW YORK State NY Zip Code 10022-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 11 / 03 / 2011
Transaction ID : SA11.3078305
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

B. MR. PETER MARK ROGERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5101 N. CASA BLANCA DRIVE #236
 City SCOTTSDALE State AZ Zip Code 85253-6988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 29 / 2011
Transaction ID : SA11.3078625
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

C. MS. EVELYN R. SAGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 84 SANTEELAH STREET
 City CHATTANOOGA State TN Zip Code 37415-2639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 22 / 2011
Transaction ID : SA11.3078451
 Amount of Each Receipt this Period 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 13 OF 29
	<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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MR. RANDALL J. SCHEUNEMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6608 STONECREST LANE
 City State Zip Code
 FAIRFAX STATION VA 22039-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ORION STRATEGIES PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2011
Transaction ID : SA11.3078445
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. LTC GERRIT J. SCHOLTEN USAF (RET)
 Full Name (Last, First, Middle Initial)
 Mailing Address 6858 E VIA DORADO
 City State Zip Code
 TUCSON AZ 85715-4821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2011
Transaction ID : SA11.3078399
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

C. MRS. SUSAN J. SPENCE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 498
 City State Zip Code
 ALTO NM 88312-0498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOMEMAKER HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2011
Transaction ID : SA11.3078530
 Amount of Each Receipt this Period
 400.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1425.00
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 14 OF 29
(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MR. MARC TERRILL
Full Name (Last, First, Middle Initial)
Mailing Address 5615 W. ACOMA DRIVE
APT. 90
City GLENDALE State AZ Zip Code 85306-4260
FEC ID number of contributing federal political committee. **C**
Name of Employer US AIRWAYS GROUP, LLC Occupation PILOT INSTRUCTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2011
Transaction ID : SA11.3078396
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. MR. ALLEN C. THOMAS
Full Name (Last, First, Middle Initial)
Mailing Address 5513 W. SLIGH AVE.
City TAMPA State FL Zip Code 33634-4431
FEC ID number of contributing federal political committee. **C**
Name of Employer MAXXAIR VENT CORP. Occupation PRESIDENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2011
Transaction ID : SA11.3078335
Amount of Each Receipt this Period 250.00
CONTRIBUTION

C. MR. BIVINS H. WILLIAMS JR.
Full Name (Last, First, Middle Initial)
Mailing Address 13810 BALMORE CIRCLE
City HOUSTON State TX Zip Code 77069-1902
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 29 / 2011
Transaction ID : SA11.3078614
Amount of Each Receipt this Period 300.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
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 15 OF 29
(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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES R. WIRT

Mailing Address **2280 W. 84 STREET #5B**

City HIALEAH	State FL	Zip Code 33016-5705
------------------------	--------------------	-------------------------------

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

Name of Employer SOUTHEAST INSURANCE CENTER, INC.	Occupation INSURANCE AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 03 / 2011

Transaction ID : SA11.3078417

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	9050.00

**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 16 OF 29
<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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. DLA PIPER LLP PAC
Full Name (Last, First, Middle Initial)
Mailing Address 500 8TH STREET NW
SUITE 700
City WASHINGTON State DC Zip Code 20004-2131
FEC ID number of contributing federal political committee. **C** C00151340
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2011
Transaction ID : SA11.3078444
Amount of Each Receipt this Period
750.00
CONTRIBUTION

B. GENERAL DYNAMICS CORPORATION PAC
Full Name (Last, First, Middle Initial)
Mailing Address 2941 FAIRVIEW PARK DRIVE
SUITE 100
City FALLS CHURCH State VA Zip Code 22042-4541
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2011
Transaction ID : SA11.3078427
Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. RAYTHEON COMPANY PAC
Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BOULEVARD
SUITE 1500
City ARLINGTON State VA Zip Code 22209-3900
FEC ID number of contributing federal political committee. **C** C00097568
Name of Employer Occupation
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
11 / 17 / 2011
Transaction ID : SA11.3078426
Amount of Each Receipt this Period
2500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4250.00
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 17 OF 29
<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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. T-MOBILE USA INC. PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2011 Transaction ID : SA11.3078628
Mailing Address 401 9TH STREET NW SUITE 550		Amount of Each Receipt this Period 1000.00
City WASHINGTON State DC Zip Code 20004-2141	FEC ID number of contributing federal political committee. C C00361758	CONTRIBUTION
Name of Employer Occupation	Aggregate Year-to-Date 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	FEC ID number of contributing federal political committee. C	
Name of Employer Occupation	Aggregate Year-to-Date	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	FEC ID number of contributing federal political committee. C	
Name of Employer Occupation	Aggregate Year-to-Date	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	5250.00

**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 18 OF 29
<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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. XO COMMUNICATIONS
Full Name (Last, First, Middle Initial)
Mailing Address 14239 COLLECTIONS CTR DR

City CHICAGO	State IL	Zip Code 60693
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1489.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2011

Transaction ID : SB15.1

Amount of Each Receipt this Period
1436.31

REFUND-PHONE SVC

B. XO COMMUNICATIONS
Full Name (Last, First, Middle Initial)
Mailing Address 14239 COLLECTIONS CTR DR

City CHICAGO	State IL	Zip Code 60693
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1489.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2011

Transaction ID : SB15.2

Amount of Each Receipt this Period
52.81

REFUND-PHONE SVC

C.
Full Name (Last, First, Middle Initial)
Mailing Address _____

City	State	Zip Code
------	-------	----------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	1489.12
TOTAL This Period (last page this line number only).....	1489.12

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 19 OF 29
(check only one)	
<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
DERBY H WATKINS

Mailing Address 16301 KELLY WOODS DR

City	State	Zip Code
FT MYERS	FL	33908

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
383764.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2011

Transaction ID : SB17.1

Amount of Each Receipt this Period
165750.00

LIST RENTAL INCOME

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

Mailing Address

City	State	Zip Code

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

Mailing Address

City	State	Zip Code

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	165750.00
TOTAL This Period (last page this line number only).....▶	165750.00

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMBER JOHNSON

Mailing Address PO BOX 16664

City ARLINGTON State VA Zip Code 22216

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21.10

Amount of Each Disbursement this Period

3235.71

Full Name (Last, First, Middle Initial)

B. AMBER JOHNSON

Mailing Address PO BOX 16664

City ARLINGTON State VA Zip Code 22216

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21.11

Amount of Each Disbursement this Period

3235.71

Full Name (Last, First, Middle Initial)

C. JANA PIERCE

Mailing Address 2201 E CAMELBACK RD

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement
FOOD AND BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21.9

Amount of Each Disbursement this Period

231.73

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

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

6703.15

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SALVATORE PURPURA

Mailing Address 3870 NW 99TH AVE

City State Zip Code
CORAL SPRINGS FL 33065

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21.3

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

B. MARSHALL SALTER

Mailing Address 308 W MYRTLE ST

City State Zip Code
ALEXANDRIA VA 22301

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21.2

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

C. ADMINISTAFF

Mailing Address 19001 CRESCENT SPRINGS DR

City State Zip Code
KINGWOOD TX 77339

Purpose of Disbursement
PAYROLL SVC-INSUR-TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21.12

Amount of Each Disbursement this Period

875.49

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

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

7575.49

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ADMINISTAFF

Mailing Address 19001 CRESCENT SPRINGS DR

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement
PAYROLL SVC-INSUR-TAXES

Candidate Name

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		30		2011

Transaction ID : SB21.13

Amount of Each Disbursement this Period

875.49

Full Name (Last, First, Middle Initial)

B. BANKCARD CENTER

Mailing Address PO BOX 569200

City DALLAS State TX Zip Code 75356

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

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		01		2011

Transaction ID : SB21.6

Amount of Each Disbursement this Period

2608.27

Full Name (Last, First, Middle Initial)

C. AT&T MOBILITY

Mailing Address PO BOX 6463

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
PHONE SVC

Candidate Name

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		01		2011

Transaction ID : SB21.102

Amount of Each Disbursement this Period

931.82

[MEMO ITEM]

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

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

3483.76

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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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BOW WOOD FLORIST

Mailing Address 100 N MCGRAW

City FORNEY State TX Zip Code 75126

Purpose of Disbursement
FLORAL DECORATIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2011

Transaction ID : SB21.103

Amount of Each Disbursement this Period

117.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOOVER FLORIST

Mailing Address 1905 HOOVER CT

City BIRMINGHAM State AL Zip Code 35226

Purpose of Disbursement
FLORAL DECORATIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2011

Transaction ID : SB21.104

Amount of Each Disbursement this Period

125.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MACNAIR TRAVEL AGENCY

Mailing Address 4100 FAIRFAX DR STE 600

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2011

Transaction ID : SB21.100

Amount of Each Disbursement this Period

70.00

[MEMO ITEM]

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

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

0.00

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2011

Transaction ID : SB21.101

Amount of Each Disbursement this Period

1230.11

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 1632 CRYSTAL SQ ARC

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2011

Transaction ID : SB21.105

Amount of Each Disbursement this Period

133.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2011

Transaction ID : SB21.21

Amount of Each Disbursement this Period

4716.04

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

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

4716.04

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21.1

Amount of Each Disbursement this Period

41.76

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 7704 LEESBURG PKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
DATABASE/PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2011

Transaction ID : SB21.7

Amount of Each Disbursement this Period

3436.59

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2011

Transaction ID : SB21.4

Amount of Each Disbursement this Period

472.65

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

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

3951.00

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address PO BOX 371461

City State Zip Code
PITTSBURGH PA 15250

Purpose of Disbursement
DELIVERY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 03 / 2011

Transaction ID : SB21.8

Amount of Each Disbursement this Period

15.17

Full Name (Last, First, Middle Initial)

B. INTERNAL REVENUE SERVICE

Mailing Address 400 N EIGHTH ST

City State Zip Code
RICHMOND VA 23219

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 15 / 2011

Transaction ID : SB21.14

Amount of Each Disbursement this Period

876.05

Full Name (Last, First, Middle Initial)

C. INTERNAL REVENUE SERVICE

Mailing Address 400 N EIGHTH ST

City State Zip Code
RICHMOND VA 23219

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : SB21.15

Amount of Each Disbursement this Period

876.05

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

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

1767.27

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2632 MARINE WAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2011

Transaction ID : SB21.19

Amount of Each Disbursement this Period

69.26

Full Name (Last, First, Middle Initial)

B. MD STATE DEPARTMENT OF TAXATION

Mailing Address 301 W PRESTON ST

City BALTIMORE State MD Zip Code 21201

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21.16

Amount of Each Disbursement this Period

290.32

Full Name (Last, First, Middle Initial)

C. MD STATE DEPARTMENT OF TAXATION

Mailing Address 301 W PRESTON ST

City BALTIMORE State MD Zip Code 21201

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21.17

Amount of Each Disbursement this Period

290.32

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

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

649.90

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. NOVA-ELAVON

Mailing Address 7300 CHAPMAN HWY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 02 / 2011

Transaction ID : **SB21.5**

Amount of Each Disbursement this Period: 55.00

Category/Type

Full Name (Last, First, Middle Initial)

B. SOUTHWEST PUBLISHING

Mailing Address 2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2011

Transaction ID : **SB21.18**

Amount of Each Disbursement this Period: 7700.61

Category/Type

Full Name (Last, First, Middle Initial)

C. US MONITOR

Mailing Address 86 MAPLE AVE

City NEW YORK State NY Zip Code 10956

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2011

Transaction ID : **SB21.20**

Amount of Each Disbursement this Period: 8.38

Category/Type

SUBTOTAL of Disbursements This Page (optional).....▶	7763.99
TOTAL This Period (last page this line number only).....▶	36610.60

**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)

COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CLARK DURANT FOR US SENATE

Mailing Address 3430 E JEFFERSON AVE

City State Zip Code
DETROIT MI 48207

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
CLARK DURANT

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 13 / 2011

Transaction ID : SB23.1

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LINDA LINGLE SENATE COMMITTEE

Mailing Address C/O 1020 N FAIRFAX ST

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
LINDA LINGLE

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 07 / 2011

Transaction ID : SB23.2

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

6000.00

6000.00